

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

ADDRESS (number and street)

214 South Bronough Street

☐Check if different  
than previously  
reported. (ACC)

Tallahassee

FL

32302

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00005561

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2010

through

07

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Alma Gonzalez

Signature of Treasurer

Electronically Filed by Alma Gonzalez

Date

07

22

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

Transfers received from the DNC, DCCC, DSCC and candidate committees, not including ASDC/Dollars for Democrats and DNC Victory Fund, were not for joint fundraising. None of the transfer in money received from the DNC or DCCC was used in the payments made for exempt activities. None of the expenses listed on Line 21b were public communications or FEA activities. None of the expenditures listed on Line 30b were expressed advocacy. The payments listed on H4, including all consulting fees, were administrative/committee fundraising expenses and not FEA nor in connection with a federal election. Payroll and all related expenses reported on Schedule H4 were for staff that did not spend more than 25% of their time on FEA or in connection with a federal election.....

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period:

From:

M M  
0 7D D  
0 1Y Y Y Y  
2 0 1 0

To:

M M  
0 7D D  
3 1Y Y Y Y  
2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>Y Y Y Y 2010</span>		526685.88
(b) Cash on Hand at Beginning of Reporting Period .....	1218695.40	
(c) Total Receipts (from Line 19) .....	840085.51	2111058.06
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2058780.91	2637743.94
7. Total Disbursements (from Line 31) .....	665974.04	1445380.39
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1392806.87	1192363.55
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	18541.50	



This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	7	0	1	2	0	1	0

To:

M	M	D	D	Y	Y	W	Y
0	7	3	1	2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	60160.00	459902.02
(ii) Unitemized .....	10000.00	46215.29
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	70160.00	506117.31
(b) Political Party Committees .....	405720.00	434613.70
(c) Other Political Committees (such as PACs) .....	20000.00	81400.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	495880.00	1022131.01
12. Transfers From Affiliated/Other Party Committees .....	168790.21	568308.31
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	503.25	32035.94
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	26584.35	27266.84
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	148327.70	461315.96
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	148327.70	461315.96
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	840085.51	2111058.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	691757.81	1649742.10

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	39608.09	177061.40	
(ii) Non-Federal Share.....	222421.17	757657.11	
(b) Other Federal Operating Expenditures.....	67362.83	158462.39	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	329392.09	1093180.90	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	2650.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	2650.00	
29. Other Disbursements.....	280000.00	280000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	56581.95	69549.49	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	56581.95	69549.49	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	665974.04	1445380.39	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	443552.87	687723.28	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	495880.00	1022131.01
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2650.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	495880.00	1019481.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	106970.92	335523.79
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	503.25	32035.94
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	106467.67	303487.85

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Francisco Aruca

Mailing Address 3628 Alcott St

City

Denver

State

CO

Zip Code

80211-2945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marczul Charters

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 1 0

Transaction ID: C4718491

Amount of Each Receipt this Period

10000.00

**B.**

Full Name (Last, First, Middle Initial)

Rita Attia

Mailing Address 2300 SW 52nd Ln

City

Cape Coral

State

FL

Zip Code

33914-6650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 3 / 2 0 1 0

Transaction ID: C4601332

Amount of Each Receipt this Period

360.00

**C.**

Full Name (Last, First, Middle Initial)

Scott Baena

Mailing Address 200 S Biscayne Blvd  
Ste 2500

City

Miami

State

FL

Zip Code

33131-5340

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bilzin Sumberg Dunn Baena  
Price & Axel

Occupation  
Suite 2500

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4604098

Amount of Each Receipt this Period

4500.00

**SUBTOTAL** of Receipts This Page (optional) .....

14860.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Heather Beaven

Mailing Address PO Box 352084

City

Palm Coast

State

FL

Zip Code

32135-2084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CEO

Occupation

FL Endowment Foundation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 2 / 2 0 1 0

Transaction ID: C4591531

Amount of Each Receipt this Period

360.00

**B.**

Full Name (Last, First, Middle Initial)

Alan Bookman

Mailing Address 30 S Spring St  
po drawer 1271

City

Pensacola

State

FL

Zip Code

32502-5612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Emmanuel Sheppard & Cordon

Occupation

Law firm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4604124

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Boylan

Mailing Address 2950 Alton Dr

City

St Pete Beach

State

FL

Zip Code

33706-2704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 2 / 2 0 1 0

Transaction ID: C4720747

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

885.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Helen & Arlin Briley

Mailing Address 219 4th Ave N  
Unit 300

City State Zip Code  
 Saint Petersburg FL 33701-2914

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 0 2 / 2 0 1 0

Transaction ID: C4591532

Amount of Each Receipt this Period

360.00

**B.**

Full Name (Last, First, Middle Initial)

Cecilia A. Bryant, PA

Mailing Address 4339 Ortega Forest Dr

City State Zip Code  
 Jacksonville FL 32210-5816

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Cecilia Bryant, PA

Occupation  
Vice President/General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718580

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Barry Burak

Mailing Address 8000 SW 67th Ave

City State Zip Code  
 Miami FL 33143-7702

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Affiliated Healthcare

Occupation  
Chiropractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718574

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1610.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Celeste C. Bush

Mailing Address 412 Farmers Market Rd

City

Fort Pierce

State

FL

Zip Code

34982-8228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed/ St. Lucie  
DEC

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 5 / 2 0 1 0

Transaction ID: C4718334

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Celeste C. Bush

Mailing Address 412 Farmers Market Rd

City

Fort Pierce

State

FL

Zip Code

34982-8228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed/ St. Lucie  
DEC

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 1 0

Transaction ID: C4720750

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Christopher V. Carlyle

Mailing Address 1215 S 9th St

City

Leesburg

State

FL

Zip Code

34748-6845

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carlyle Appellate Law Firm

Occupation

Law Firm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4604096

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2175.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

John Cortes

Mailing Address 216 Old Mill Cir

City

Kissimmee

State

FL

Zip Code

34746-6060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kissimmee City Commission

Occupation

City Commissioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 1 0

Transaction ID: C4718638

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Yolanda Escollies

Mailing Address 5333 Collins Ave  
Apt 1106

City

Miami Beach

State

FL

Zip Code

33140-3248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 2 / 2 0 1 0

Transaction ID: C4591524

Amount of Each Receipt this Period

180.00

C.

Full Name (Last, First, Middle Initial)

Maurice Ferre

Mailing Address 3900 Poinciana Ave

City

Miami

State

FL

Zip Code

33133-6424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ferre and Associates

Occupation

Political consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 1 0

Transaction ID: C4718629

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) .....

780.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 12 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Hector D. Fortun

Mailing Address 365 Palermo Ave

City

Coral Gables

State

FL

Zip Code

33134-6607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fortun Insurance

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718573

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Armando Garcia

Mailing Address 10304 SW 115th Ct

City

Miami

State

FL

Zip Code

33176-2540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Complete Medical Rehabili-  
tation Family

Occupation  
Cardiology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 1 0

Transaction ID: C4718502

Amount of Each Receipt this Period

8500.00

**C.**

Full Name (Last, First, Middle Initial)

Armando Garcia

Mailing Address 10304 SW 115th Ct

City

Miami

State

FL

Zip Code

33176-2540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Complete Medical Rehabili-  
tation Family

Occupation  
Cardiology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 1 0

Transaction ID: C4718504

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 142

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Francine A. Garcia

Mailing Address 15346 Ponce De Leon Ln

City

Clermont

State

FL

Zip Code

34714-6187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	6	/	2	0	1	0

Transaction ID: C4604135

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Jack Glottmann

Mailing Address 701 SW 27th Ave  
Ste 701

City

Miami

State

FL

Zip Code

33135-3026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Saglo Development Corpora-  
tionOccupation  
Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	1	0

Transaction ID: C4695912

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

James Golden

Mailing Address PO Box 488

City

Bradenton

State

FL

Zip Code

34206-0488

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	5	/	2	0	1	0

Transaction ID: C4718374

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional) .....

1400.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Gregory Haile

Mailing Address 410 NE 94th St

City

Miami Shores

State

FL

Zip Code

33138-2846

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Berger Singerman

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 1 0

Transaction ID: C4718456

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Patrick Hannah

Mailing Address 2350 Meridian Parkway #300

City

Durham

State

NC

Zip Code

27713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hennch Consulting Group

Occupation  
Political consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 5 / 2 0 1 0

Transaction ID: C4718406

Amount of Each Receipt this Period

360.00

**C.**

Full Name (Last, First, Middle Initial)

Allen Harper

Mailing Address 265 County Road 204

City

Durango

State

CO

Zip Code

81301-8843

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Heritage Railway

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 9 / 2 0 1 0

Transaction ID: C4718465

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1860.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Brodes H. Hartley, Jr., Jr.

Mailing Address 19338 SW 80th Ct

City

Cutler Bay

State

FL

Zip Code

33157-7437

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Community Health of South  
Dade

Occupation

Health Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4604113

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Curt Jacobson

Mailing Address 2138 River Ridge Dr

City

Sarasota

State

FL

Zip Code

34239-4221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unemployed

Occupation

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 5 / 2 0 1 0

Transaction ID: C4718345

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Nancy C. Jacobson

Mailing Address 1730 Reppard Rd

City

Orlando

State

FL

Zip Code

32803-1926

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 5 / 2 0 1 0

Transaction ID: C4718436

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Nancy C. Jacobson

Mailing Address 1730 Reppard Rd

City

Orlando

State

FL

Zip Code

32803-1926

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718579

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Peter Kirkwood

Mailing Address 450 Knights Run Ave  
Unit 1208

City

Tampa

State

FL

Zip Code

33602-5806

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Barnett, Bolt, Kirkwood  
& Long

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718584

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Ron Klein

Mailing Address 1900 Glades Rd  
Ste 200

City

Boca Raton

State

FL

Zip Code

33431-7333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Legislator

Occupation  
Congressman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 1 0

Transaction ID: C4695855

Amount of Each Receipt this Period

1300.00

**SUBTOTAL** of Receipts This Page (optional) .....

2400.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Ron Klein

Mailing Address 1900 Glades Rd  
Ste 200

City State Zip Code  
Boca Raton FL 33431-7333

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
US Legislator

Occupation  
Congressman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 1 0

Transaction ID: C4695857

Amount of Each Receipt this Period

1800.00

**B.**

Full Name (Last, First, Middle Initial)

Suzanne Kosmas

Mailing Address 920 E 3rd Ave

City State Zip Code  
New Smyrna Beach FL 32169-3147

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self employed

Occupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 6 / 2 0 1 0

Transaction ID: C4718315

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Janet Long

Mailing Address 11783 Ashley Ct

City State Zip Code  
Seminole FL 33772-2245

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Clearwater Central Cathol-  
ic High School

Occupation  
Special Assistant to the President / A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 5 / 2 0 1 0

Transaction ID: C4718339

Amount of Each Receipt this Period

450.00

**SUBTOTAL** of Receipts This Page (optional) .....

2550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Marta Losada

Mailing Address 6470 SW 82nd St

City

Miami

State

FL

Zip Code

33143-7912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718576

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Marsha G. Madorsky

Mailing Address 2000 S Bayshore Dr  
villa 41

City

Miami

State

FL

Zip Code

33133-3252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carlton Fields

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4604104

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Stephen Mason

Mailing Address 3939 Snapper Pointe Dr

City

Tampa

State

FL

Zip Code

33611-1030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bay Care Health Systems

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4604099

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Tom McKone

Mailing Address 687 Alderman Rd  
Ste 115

City State Zip Code  
Palm Harbor FL 34683-2602

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
H.C. Recruits

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4695853

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Gwendolyn F. McLin

Mailing Address 5415 Banana Point Dr

City State Zip Code  
Okahumpka FL 34762-3334

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Florida Board Of Regents

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 1 0

Transaction ID: C4601845

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Corinne T. T. Miller

Mailing Address 22065 Palms Way  
Apt 101

City State Zip Code  
Boca Raton FL 33433-8014

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 1 0

Transaction ID: C4718641

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

1600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Michael T. Moore

Mailing Address 3515 Anderson Rd

City

Coral Gables

State

FL

Zip Code

33134-7050

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Holland & Knight

Occupation

Attorney- Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718575

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Phil Morton

Mailing Address 11704 Sunowa Springs Trl

City

Bryceville

State

FL

Zip Code

32009-1541

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 1 0

Transaction ID: C4595130

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Jared Moskowitz

Mailing Address 480 SW 12th Ave  
Ste 103

City

Pompano Beach

State

FL

Zip Code

33069-3538

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 5 / 2 0 1 0

Transaction ID: C4718326

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

1600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Kenneth F. Murrah

Mailing Address 1601 Legion Dr  
Alpha Tau Omega Foundation

City State Zip Code  
Winter Park FL 32789-1432

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Murrah, Doyle & Wigle, P.-  
A.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 1 0

Transaction ID: C4718461

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Craig Newmark

Mailing Address 156 Woodland Ave

City State Zip Code  
San Francisco CA 94117-3861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Craigslist, Inc.

Occupation  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 2 / 2 0 1 0

Transaction ID: C4591523

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

John Nicholson

Mailing Address 1423 W Main St  
Apt 3F

City State Zip Code  
Carmel IN 46032-1475

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
State of Indiana

Occupation  
Deputy Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 2 / 2 0 1 0

Transaction ID: C4591527

Amount of Each Receipt this Period

180.00

**SUBTOTAL** of Receipts This Page (optional) .....

1680.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Dan F. Parham

Mailing Address 68 Brunett Lane

City

Palm Coast

State

FL

Zip Code

32137

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Chair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 9 / 2 0 1 0

Transaction ID: C4695880

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Almena H. Pettit

Mailing Address 1424 Vieux Carre Dr

City

Tallahassee

State

FL

Zip Code

32308-7732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
B & A Properties

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 1 0

Transaction ID: C4696252

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Joan Pollitt

Mailing Address 2614 Tamiami Trl N  
# 524

City

Naples

State

FL

Zip Code

34103-4409

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self-employed

Occupation  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718578

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1050.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Sylvie Posner

Mailing Address 1721 Corsica Dr

City

Wellington

State

FL

Zip Code

33414-1046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 1 0

Transaction ID: C4719091

Amount of Each Receipt this Period

450.00

**B.**

Full Name (Last, First, Middle Initial)

Walter Postula

Mailing Address 4836 SE Manatee Cove Rd

City

Stuart

State

FL

Zip Code

34997-2329

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718567

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Justice Ira J. Raab

Mailing Address 9452 Lantern Bay Cir

City

West Palm Beach

State

FL

Zip Code

33411-5169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Court of Appeals

Occupation  
Justice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 2 / 2 0 1 0

Transaction ID: C4720763

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Richard K. Reiner

Mailing Address 2711 Orchard Dr

City

Apopka

State

FL

Zip Code

32712-4501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Florida Hospital

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4604125

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Jim Reynolds

Mailing Address 300 Palm Dr  
Apt 4

City

Naples

State

FL

Zip Code

34112-4909

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 5 / 2 0 1 0

Transaction ID: C4718434

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Stewart Shaffer

Mailing Address 14345 Sanhatchee St

City

Clermont

State

FL

Zip Code

34711-5351

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4604114

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1050.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Marcia Smith

Mailing Address 361 SW 187th Ave

City

Pembroke Pines

State

FL

Zip Code

33029-5435

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Polk County Schools

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 1 0

Transaction ID: C4718647

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Jeffrey Solomon

Mailing Address 13865 S Dixie Hwy  
Ste 307

City

Miami

State

FL

Zip Code

33176-7221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Chiropractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 5 / 2 0 1 0

Transaction ID: C4717480

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Neal R. Sonnett

Mailing Address 2 S Biscayne Blvd  
Ste 2600

City

Miami

State

FL

Zip Code

33131-1819

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 1 0

Transaction ID: C4591525

Amount of Each Receipt this Period

360.00

**SUBTOTAL** of Receipts This Page (optional) .....

710.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

William Ulbricht

Mailing Address 2304 Dovewood Estates Ct

City

Valrico

State

FL

Zip Code

33594-4659

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Anthony's Heath Care

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4604115

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

John Upchurch

Mailing Address 125 S Palmetto Ave

City

Daytona Beach

State

FL

Zip Code

32114-4333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Upchurch, Watson, White, &  
Fraxed

Occupation  
Attorney/Mediator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718582

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Morris Weinberg, Jr.

Mailing Address 3415 W Mullen Ave

City

Tampa

State

FL

Zip Code

33609-4631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Zuckerman Spaeder

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 1 0

Transaction ID: C4696249

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 27 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Ian Whitney

Mailing Address 1209 Virginia St  
Apt 3

City State Zip Code  
Key West FL 33040-3452

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Innkeepers Association

Occupation  
State Committeeman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 5 / 2 0 1 0

Transaction ID: C4718384

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Gwynne A. Young

Mailing Address 4208 W Beach Park Dr

City State Zip Code  
Tampa FL 33609-3814

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Carlton Fields

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4604093

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Kenneth Young

Mailing Address 12351 Rock Garden Ln

City State Zip Code  
Miami FL 33156-5733

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718570

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

3800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 28 / 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Roy C. Young

Mailing Address PO Box 1833

City

Tallahassee

State

FL

Zip Code

32302-1833

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Young, Van Assenderp, Var-  
nadoe & Ander

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 0 / 2 0 1 0

Transaction ID: C4718581

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

60160.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 29 / 142

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing  
federal political committee.

**C**

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845360.37

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4731371

Amount of Each Receipt this Period

3220.00

\* In-Kind: Voter File Access

**B.**

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing  
federal political committee.

**C**

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845360.37

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 1 0

Transaction ID: C4718621

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing  
federal political committee.

**C**

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845360.37

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: C4728296

Amount of Each Receipt this Period

400000.00

**SUBTOTAL** of Receipts This Page (optional) .....

405720.00

**TOTAL** This Period (last page this line number only) .....

405720.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)  
Committee on Letter Carriers Political Education -

Mailing Address 100 Indiana Ave NW

City State Zip Code  
Washington DC 20001-2143

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 27 2010

Transaction ID: C4720683

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
MILLENNIUM LEADERSHIP PAC; THE

Mailing Address PO Box 100277  
FT LAUDERDALE

City State Zip Code  
Fort Lauderdale FL 33310-0277

FEC ID number of contributing federal political committee. **C** C00451609

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 13 2010

Transaction ID: C4696266

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Political Educational Fund of the BCTD

Mailing Address 815 16TH ST., NW, SUITE 600

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00003160

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 19 2010

Transaction ID: C4719341

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

15000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 142

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

SEIU C.O.P.E. Fund

Mailing Address 1313 L St NW

City

Washington

State

DC

Zip Code

20005-4110

FEC ID number of contributing  
federal political committee.

**C**

C00004036

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 1 0

Transaction ID: C4718594

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

20000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 142

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Glenn Burkett For Us Burkett

Mailing Address 5431 Airport Pulling Rd N

City

Naples

State

FL

Zip Code

34109-2004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Glenn Burkett for US Sena-  
te

Occupation

Political Campaign

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 1 0

Transaction ID: C4720771

Amount of Each Receipt this Period

180.00

**B.**

Full Name (Last, First, Middle Initial)

Campaign Account for Kendrick Meek

Mailing Address 111 NW 183rd St  
Ste 325

City

Miami

State

FL

Zip Code

33169-4538

FEC ID number of contributing  
federal political committee.

**C**

C00458646

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C4604141

Amount of Each Receipt this Period

350.00

**C.**

Full Name (Last, First, Middle Initial)

Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing  
federal political committee.

**C**

C00000935

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

163842.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 1 0

Transaction ID: C4720391

Amount of Each Receipt this Period

22795.00

**SUBTOTAL** of Receipts This Page (optional) .....

23325.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

FEC ID number of contributing  
federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

163842.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 2 / 2 0 1 0

Transaction ID: C4720395

Amount of Each Receipt this Period

64015.00

**B.**

Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

FEC ID number of contributing  
federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

163842.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 1 0

Transaction ID: C4720405

Amount of Each Receipt this Period

56950.00

**C.**

Full Name (Last, First, Middle Initial)  
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

FEC ID number of contributing  
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845360.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 1 0

Transaction ID: C4592125

Amount of Each Receipt this Period

4924.00

**SUBTOTAL** of Receipts This Page (optional) .....

125889.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 142

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Ed Tautiva for Congress

Mailing Address PO Box 210896

City

Royal Palm Beach

State

FL

Zip Code

33421-0896

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 1 0

Transaction ID: C4718637

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

James Piccillo for Congress Campaign Account

Mailing Address 7810 Land O Lakes Blvd

City

Land O Lakes

State

FL

Zip Code

34638-5701

FEC ID number of contributing  
federal political committee.

C

C00460642

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 1 0

Transaction ID: C4696261

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing  
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845360.37

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 7 / 2 0 1 0

Transaction ID: C4720700

Amount of Each Receipt this Period

16976.21

**SUBTOTAL** of Receipts This Page (optional) .....

19576.21

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 142

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Shirley Baer

Mailing Address 6621 SE Harbor Cir

City

Stuart

State

FL

Zip Code

34996-1962

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 8 / 2 0 1 0

Transaction ID: C4730044

Amount of Each Receipt this Period

213.75

**[MEMO ITEM]**

\* Victory Fund

**B.**

Full Name (Last, First, Middle Initial)

Jean Bookout

Mailing Address 1212 San Mateo Dr

City

Punta Gorda

State

FL

Zip Code

33950-6328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

Transaction ID: C4730048

Amount of Each Receipt this Period

285.00

**[MEMO ITEM]**

\* Victory Fund

**C.**

Full Name (Last, First, Middle Initial)

C. Corley

Mailing Address 15430 Catalpa Cove Ln

City

Fort Myers

State

FL

Zip Code

33908-1709

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
C2 Productions, Inc.

Occupation  
Freelance Voice Actor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

Transaction ID: C4730054

Amount of Each Receipt this Period

950.00

**[MEMO ITEM]**

\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 142

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Charles Flanders

Mailing Address 6340 NW 200th St

City

Hialeah

State

FL

Zip Code

33015-2184

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

Transaction ID: C4730052

Amount of Each Receipt this Period

190.00

**[MEMO ITEM]**

\* Victory Fund

**B.**

Full Name (Last, First, Middle Initial)

Cecil Flemming

Mailing Address 582 SW Fairway Ave

City

Port St Lucie

State

FL

Zip Code

34983-2906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 8 / 2 0 1 0

Transaction ID: C4730056

Amount of Each Receipt this Period

285.00

**[MEMO ITEM]**

\* Victory Fund

**C.**

Full Name (Last, First, Middle Initial)

Florence Free

Mailing Address 100 Sunrise Ave

City

Palm Beach

State

FL

Zip Code

33480-3963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 1 0

Transaction ID: C4730050

Amount of Each Receipt this Period

323.00

**[MEMO ITEM]**

\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

WILLIAM LAIMBEER

Mailing Address 220 S Collier Blvd  
PH A

City State Zip Code  
Marco Island FL 34145-4863

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 1 0

Transaction ID: C4730057

Amount of Each Receipt this Period

285.00

**[MEMO ITEM]**

\* Victory Fund

**B.**

Full Name (Last, First, Middle Initial)

Jesse Z Lurie

Mailing Address 401 E Linton Blvd  
Apt 656

City State Zip Code  
Delray Beach FL 33483-5088

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 1 0

Transaction ID: C4730063

Amount of Each Receipt this Period

475.00

**[MEMO ITEM]**

\* Victory Fund

**C.**

Full Name (Last, First, Middle Initial)

Tim Murphy

Mailing Address 8930 Oldham Way

City State Zip Code  
West Palm Beach FL 33412-1109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Certus Vieil Tech

Occupation  
Anazlst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 1 0

Transaction ID: C4730067

Amount of Each Receipt this Period

142.50

**[MEMO ITEM]**

\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 142

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Tim Murphy

Mailing Address 8930 Oldham Way

City

West Palm Beach

State

FL

Zip Code

33412-1109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Certus Vieil Tech

Occupation  
Anazlst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 1 / 2 0 1 0

Transaction ID: C4730068

Amount of Each Receipt this Period

71.25

**[MEMO ITEM]**

\* Victory Fund

**B.**

Full Name (Last, First, Middle Initial)

Margaret Saunders

Mailing Address 6945 Carlisle Ct  
Apt C138

City

Naples

State

FL

Zip Code

34109-6883

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 1 0

Transaction ID: C4730069

Amount of Each Receipt this Period

1900.00

**[MEMO ITEM]**

\* Victory Fund

**C.**

Full Name (Last, First, Middle Initial)

Ruth Hunt Schultz

Mailing Address 832 NW 45th Ter

City

Gainesville

State

FL

Zip Code

32605-5504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 1 0

Transaction ID: C4730065

Amount of Each Receipt this Period

285.00

**[MEMO ITEM]**

\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 142

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Judith Thomson

Mailing Address 5969 San Michelle Dr  
Same

City State Zip Code  
Sarasota FL 34243-2649

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

Transaction ID: C4730071

Amount of Each Receipt this Period

95.00

**[MEMO ITEM]**

\* Victory Fund

**B.**

Full Name (Last, First, Middle Initial)

Judith Thomson

Mailing Address 5969 San Michelle Dr  
Same

City State Zip Code  
Sarasota FL 34243-2649

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: C4730072

Amount of Each Receipt this Period

190.00

**[MEMO ITEM]**

\* Victory Fund

**C.**

Full Name (Last, First, Middle Initial)

Democratic National Committee Serv - Unitemized

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

FEC ID number of contributing  
federal political committee.

**C** C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2208.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 1 0

Transaction ID: CZ4720700

Amount of Each Receipt this Period

2208.75

**[MEMO ITEM]**

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

168790.21

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Blue Cross and Blue Shield of Florida

Mailing Address PO Box 2210

City

Jacksonville

State

FL

Zip Code

32203-2210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

503.25

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 1 0

Transaction ID: C4595161

Amount of Each Receipt this Period

503.25

**SUBTOTAL** of Receipts This Page (optional) .....

503.25

**TOTAL** This Period (last page this line number only) .....

503.25



A. Form/Schedule : **SA15**

Refund due to billing error made on 10/4/07.

Transaction ID : **C4595161**

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Capital City Bank

Mailing Address PO Box 1630

City

Tallahassee

State

FL

Zip Code

32302-1630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

766.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 1 0

Transaction ID: C4728349

Amount of Each Receipt this Period

84.35

**B.**

Full Name (Last, First, Middle Initial)

Debbie Wasserman Schultz For Congress

Mailing Address 1071 Twin Branch Ln

City

Weston

State

FL

Zip Code

33326-2828

FEC ID number of contributing  
federal political committee.

C

C00385773

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 1 0

Transaction ID: C4696255

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph Falk

Mailing Address 1770 Micanopy Ave

City

Coconut Grove

State

FL

Zip Code

33133-3323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Akerman Senterfitt

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 1 0

Transaction ID: C4591528

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

5084.35

**TOTAL** This Period (last page this line number only) .....

B. Form/Schedule : **SA17**

Transaction ID : **C4696255**

The receipt from Debbie Wasserman Shultz For Congress was for voter file purchase as fair market value. The Committee assessed the usual and normal charge for the goods and/or services provided. The market value was set after analyzing comparable vendors in the surrounding area/market.

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 142

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Joseph Falk

Mailing Address 1770 Micanopy Ave

City

Coconut Grove

State

FL

Zip Code

33133-3323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Akerman Senterfitt

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 1 0

Transaction ID: C4591530

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Fredrica S. Wilson For Congress

Mailing Address 19821 NW 2nd Ave  
# 354

City

Miami

State

FL

Zip Code

33169-3341

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 1 0

Transaction ID: C4718590

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Donald Hinkle

Mailing Address 3710 Bobbin Mill Rd

City

Tallahassee

State

FL

Zip Code

32312-1202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hinkle & Foran

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 1 0

Transaction ID: C4591526

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

**B.** Form/Schedule : **SA17**

Transaction ID : **C4718590**

The receipt from Fredrica S. Wilson for Congress was for voter file purchase as fair market value. The Committee assessed the usual and normal charge for the goods and/or services provided. The market value was set after analyzing comparable vendors in the surrounding area/market.

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 142

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Donald Hinkle

Mailing Address 3710 Bobbin Mill Rd

City

Tallahassee

State

FL

Zip Code

32312-1202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hinkle & Foran

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 1 0

Transaction ID: C4717478

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Julia Johnson

Mailing Address 5169 Latrobe Dr

City

Windermere

State

FL

Zip Code

34786-8959

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Net Communications

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 1 0

Transaction ID: C4591529

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Lori Edwards Campaign

Mailing Address PO Box 280

City

Eagle Lake

State

FL

Zip Code

33839-0280

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 1 0

Transaction ID: C4695905

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

C. Form/Schedule : **SA17**  
Transaction ID : **C4695905**

The receipt from The Lori Edwards Campaign was for voter file purchase as fair market value. The Committee assessed the usual and normal charge for the goods and/or services provided. The market value was set after analyzing comparable vendors in the surrounding area/market.

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 142

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Rudy Moise For Congress

Mailing Address PO Box 680417

City

Miami

State

FL

Zip Code

33168-0417

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2110.70

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 1 0

Transaction ID: C4696258

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

26584.35



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) American Express Merchant Services	<b>Transaction ID:</b> D313761 <b>Date of Disbursement</b>																				
Mailing Address PO Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	1		2	0	1	0												
City Phoenix State AZ Zip Code 85072-3852	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Merchant Service Fee Candidate Name	<table border="1"> <tr> <td colspan="10">11.05</td> </tr> </table>	11.05																			
11.05																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) American Express Merchant Services	<b>Transaction ID:</b> D313762 <b>Date of Disbursement</b>																				
Mailing Address PO Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	9		2	0	1	0												
City Phoenix State AZ Zip Code 85072-3852	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Merchant Service Fee Candidate Name	<table border="1"> <tr> <td colspan="10">361.13</td> </tr> </table>	361.13																			
361.13																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) AMO Recoveries	<b>Transaction ID:</b> D308282 <b>Date of Disbursement</b>																				
Mailing Address 19401 40th Ave W Ste 440	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	1		2	0	1	0												
City Lynnwood State WA Zip Code 98036-5600	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Admin Telephone Candidate Name	<table border="1"> <tr> <td colspan="10">410.49</td> </tr> </table>	410.49																			
410.49																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**782.67**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.** Full Name (Last, First, Middle Initial)  
Blue Cross and Blue Shield of Florida

Mailing Address PO Box 2210

City Jacksonville State FL Zip Code 32203-2210

Purpose of Disbursement  
Benefits

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D308643

Date of Disbursement

/   /

Amount of Each Disbursement this Period

354.03

**B.** Full Name (Last, First, Middle Initial)  
Blue Cross and Blue Shield of Florida

Mailing Address PO Box 2210

City Jacksonville State FL Zip Code 32203-2210

Purpose of Disbursement  
Benefits

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D308644

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1063.47

**C.** Full Name (Last, First, Middle Initial)  
Blue Cross and Blue Shield of Florida

Mailing Address PO Box 2210

City Jacksonville State FL Zip Code 32203-2210

Purpose of Disbursement  
Benefits

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D312732

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2503.05

**SUBTOTAL** of Disbursements This Page (optional) .....

3920.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 51 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.** Full Name (Last, First, Middle Initial)  
Blue Cross and Blue Shield of Florida

Mailing Address PO Box 2210

City Jacksonville State FL Zip Code 32203-2210

Purpose of Disbursement  
Benefits

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312733

Date of Disbursement

07 / 28 / 2010

Amount of Each Disbursement this Period

726.00

**B.** Full Name (Last, First, Middle Initial)  
Capital City Bank

Mailing Address PO Box 1630

City Tallahassee State FL Zip Code 32302-1630

Purpose of Disbursement  
Merchant Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313757

Date of Disbursement

07 / 02 / 2010

Amount of Each Disbursement this Period

20.00

**C.** Full Name (Last, First, Middle Initial)  
Capital City Bank

Mailing Address PO Box 1630

City Tallahassee State FL Zip Code 32302-1630

Purpose of Disbursement  
Merchant Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313758

Date of Disbursement

07 / 22 / 2010

Amount of Each Disbursement this Period

40.00

**SUBTOTAL** of Disbursements This Page (optional) .....

786.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Capital City Bank</p> <p>Mailing Address PO Box 1630</p> <p>City Tallahassee State FL Zip Code 32302-1630</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D313759</p> <p>Date of Disbursement 07 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 323.54</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation</p> <p>Mailing Address 430 S Capitol St SE</p> <p>City Washington State DC Zip Code 20003-4024</p> <p>Purpose of Disbursement Voter File Access</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D315255</p> <p>Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 3220.00</p> <p>* In-Kind Received</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Elavon Merchant Services</p> <p>Mailing Address 1 Concourse Pkwy NE Ste 300</p> <p>City Atlanta State GA Zip Code 30328-5346</p> <p>Purpose of Disbursement Merchant Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D313760</p> <p>Date of Disbursement 07 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 309.76</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

3853.30

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Elavon Merchant Services

Mailing Address 1 Concourse Pkwy NE  
Ste 300

City Atlanta State GA Zip Code 30328-5346

Purpose of Disbursement

Merchant Service Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313763

Date of Disbursement

07 / 02 / 2010

Amount of Each Disbursement this Period

70.00

B.

Full Name (Last, First, Middle Initial)

Elavon Merchant Services

Mailing Address 1 Concourse Pkwy NE  
Ste 300

City Atlanta State GA Zip Code 30328-5346

Purpose of Disbursement

Merchant Service Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313764

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

295.00

C.

Full Name (Last, First, Middle Initial)

Greater St. Luke AME

Mailing Address PO Box 176

City Malone State FL Zip Code 32445-0176

Purpose of Disbursement

Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313286

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional) .....

415.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Nesbitt Research

Mailing Address 2120 L St NW  
Ste 305

City Washington State DC Zip Code 20037-1563

Purpose of Disbursement  
Consulting/ Research

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D308588

Date of Disbursement

07 / 06 / 2010

Amount of Each Disbursement this Period

2599.95

B.

Full Name (Last, First, Middle Initial)

New Partners Consulting, Inc.

Mailing Address 401 9th St NW  
Ste 725

City Washington State DC Zip Code 20004-2176

Purpose of Disbursement  
Consulting/Fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313283

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

33084.83

C.

Full Name (Last, First, Middle Initial)

Payroll Matters

Mailing Address 2069 N Monroe St

City Tallahassee State FL Zip Code 32303-4727

Purpose of Disbursement  
Payroll Tax

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313318

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

5194.45

SUBTOTAL of Disbursements This Page (optional) .....

40879.23

TOTAL This Period (last page this line number only) .....

B. Form/Schedule : **SB21B**  
Transaction ID : **D313283**

Expenditures made to New Partner's Consulting for consulting/fundraising activity was solely for the benefit of the Executive Committee.

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Payroll Matters	<b>Transaction ID:</b> D313320 <b>Date of Disbursement</b>																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32303-4727</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll Tax</td> <td rowspan="2">Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32303-4727	Purpose of Disbursement Payroll Tax		Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>408.74</td> </tr> </table>	408.74											
City Tallahassee	State FL	Zip Code 32303-4727																			
Purpose of Disbursement Payroll Tax		Category/ Type																			
Candidate Name																					
408.74																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Payroll Matters	<b>Transaction ID:</b> D313321 <b>Date of Disbursement</b>																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32303-4727</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll Fee</td> <td rowspan="2">Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32303-4727	Purpose of Disbursement Payroll Fee		Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>7.25</td> </tr> </table>	7.25											
City Tallahassee	State FL	Zip Code 32303-4727																			
Purpose of Disbursement Payroll Fee		Category/ Type																			
Candidate Name																					
7.25																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Payroll Matters	<b>Transaction ID:</b> D313332 <b>Date of Disbursement</b>																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32303-4727</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll Tax</td> <td rowspan="2">Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32303-4727	Purpose of Disbursement Payroll Tax		Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2677.14</td> </tr> </table>	2677.14											
City Tallahassee	State FL	Zip Code 32303-4727																			
Purpose of Disbursement Payroll Tax		Category/ Type																			
Candidate Name																					
2677.14																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

3093.13

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Payroll Matters	<b>Transaction ID:</b> D313398 <b>Date of Disbursement</b>																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32303-4727</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll Tax</td> <td rowspan="2"> <input type="checkbox"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32303-4727	Purpose of Disbursement Payroll Tax		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1266.04</td> </tr> </table>	1266.04											
City Tallahassee	State FL	Zip Code 32303-4727																			
Purpose of Disbursement Payroll Tax		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
1266.04																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Payroll Matters	<b>Transaction ID:</b> D313399 <b>Date of Disbursement</b>																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32303-4727</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll Tax</td> <td rowspan="2"> <input type="checkbox"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32303-4727	Purpose of Disbursement Payroll Tax		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>317.48</td> </tr> </table>	317.48											
City Tallahassee	State FL	Zip Code 32303-4727																			
Purpose of Disbursement Payroll Tax		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
317.48																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Payroll Matters	<b>Transaction ID:</b> D313400 <b>Date of Disbursement</b>																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32303-4727</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll Tax</td> <td rowspan="2"> <input type="checkbox"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32303-4727	Purpose of Disbursement Payroll Tax		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1825.38</td> </tr> </table>	1825.38											
City Tallahassee	State FL	Zip Code 32303-4727																			
Purpose of Disbursement Payroll Tax		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
1825.38																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3408.90**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 58 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Payroll Matters	<b>Transaction ID:</b> D313401 <b>Date of Disbursement</b>																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32303-4727</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll Fee</td> <td rowspan="2"> <input type="text"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32303-4727	Purpose of Disbursement Payroll Fee		<input type="text"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>63.25</td> </tr> </table>	63.25											
City Tallahassee	State FL	Zip Code 32303-4727																			
Purpose of Disbursement Payroll Fee		<input type="text"/> Category/ Type																			
Candidate Name																					
63.25																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Payroll Matters	<b>Transaction ID:</b> D312073 <b>Date of Disbursement</b>																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	1	0												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32303-4727</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll Fees</td> <td rowspan="2"> <input type="text"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32303-4727	Purpose of Disbursement Payroll Fees		<input type="text"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>36.50</td> </tr> </table>	36.50											
City Tallahassee	State FL	Zip Code 32303-4727																			
Purpose of Disbursement Payroll Fees		<input type="text"/> Category/ Type																			
Candidate Name																					
36.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Payroll Matters	<b>Transaction ID:</b> D312077 <b>Date of Disbursement</b>																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	1	0												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32303-4727</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll Tax</td> <td rowspan="2"> <input type="text"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32303-4727	Purpose of Disbursement Payroll Tax		<input type="text"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>6081.88</td> </tr> </table>	6081.88											
City Tallahassee	State FL	Zip Code 32303-4727																			
Purpose of Disbursement Payroll Tax		<input type="text"/> Category/ Type																			
Candidate Name																					
6081.88																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6181.63**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Principal Financial Group</p> <hr/> <p>Mailing Address PO Box 14416 Dept. 900</p> <hr/> <p>City Des Moines State IA Zip Code 50306-3416</p> <hr/> <p>Purpose of Disbursement Benefits</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D312734</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>79.74</td> </tr> </table> <hr/> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	8		2	0	1	0	79.74
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		2	8		2	0	1	0													
79.74																						
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Matthew Wilson</p> <hr/> <p>Mailing Address 5760 Braveheart Way</p> <hr/> <p>City Tallahassee State FL Zip Code 32317-9409</p> <hr/> <p>Purpose of Disbursement Staff Reimbursement</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D308589</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>69.00</td> </tr> </table> <hr/> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	7		2	0	1	0	69.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		0	7		2	0	1	0													
69.00																						
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Matthew Wilson</p> <hr/> <p>Mailing Address 5760 Braveheart Way</p> <hr/> <p>City Tallahassee State FL Zip Code 32317-9409</p> <hr/> <p>Purpose of Disbursement Auto Travel</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D308590</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>69.00</td> </tr> </table> <hr/> <p>Category/Type</p> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	7		2	0	1	0	69.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		0	7		2	0	1	0													
69.00																						

**SUBTOTAL** of Disbursements This Page (optional) .....

148.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Christopher Lazo

Mailing Address 1951 N Meridian Rd  
Apt 28

City Tallahassee State FL Zip Code 32303-5249

Purpose of Disbursement  
Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D308667

Date of Disbursement

07 / 06 / 2010

Amount of Each Disbursement this Period

120.63

B.

Full Name (Last, First, Middle Initial)

Christopher Lazo

Mailing Address 1951 N Meridian Rd  
Apt 28

City Tallahassee State FL Zip Code 32303-5249

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D308668

Date of Disbursement

07 / 06 / 2010

Amount of Each Disbursement this Period

120.63

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Matthew Wilson

Mailing Address 5760 Braveheart Way

City Tallahassee State FL Zip Code 32317-9409

Purpose of Disbursement  
Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D310200

Date of Disbursement

07 / 09 / 2010

Amount of Each Disbursement this Period

163.80

SUBTOTAL of Disbursements This Page (optional) .....

284.43

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 61 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Matthew Wilson

Mailing Address 5760 Braveheart Way

City Tallahassee State FL Zip Code 32317-9409

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D310201

Date of Disbursement

07 / 09 / 2010

Amount of Each Disbursement this Period

163.80

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Matthew Wilson

Mailing Address 5760 Braveheart Way

City Tallahassee State FL Zip Code 32317-9409

Purpose of Disbursement  
Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D311835

Date of Disbursement

07 / 19 / 2010

Amount of Each Disbursement this Period

325.54

C.

Full Name (Last, First, Middle Initial)

Matthew Wilson

Mailing Address 5760 Braveheart Way

City Tallahassee State FL Zip Code 32317-9409

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D311836

Date of Disbursement

07 / 19 / 2010

Amount of Each Disbursement this Period

325.54

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

325.54

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Christopher Lazo	<b>Transaction ID:</b> D312037 <b>Date of Disbursement</b>																				
Mailing Address 1951 N Meridian Rd Apt 28	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	9		2	0	1	0												
City Tallahassee State FL Zip Code 32303-5249	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Staff Reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">294.42</td> </tr> </table>	294.42																			
294.42																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Christopher Lazo	<b>Transaction ID:</b> D312040 <b>Date of Disbursement</b>																				
Mailing Address 1951 N Meridian Rd Apt 28	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	9		2	0	1	0												
City Tallahassee State FL Zip Code 32303-5249	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Auto Travel Candidate Name	<table border="1"> <tr> <td colspan="10">285.12</td> </tr> </table>	285.12																			
285.12																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Waffle House	<b>Transaction ID:</b> D312039 <b>Date of Disbursement</b>																				
Mailing Address 1066 Highway 301	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	9		2	0	1	0												
City Baldwin State FL Zip Code 32234	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Lunch Meeting Candidate Name	<table border="1"> <tr> <td colspan="10">9.30</td> </tr> </table>	9.30																			
9.30																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

294.42

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Matthew Wilson	<b>Transaction ID:</b> D312187 <b>Date of Disbursement</b>																				
Mailing Address 5760 Braveheart Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	0												
City Tallahassee State FL Zip Code 32317-9409	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Staff Reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">294.22</td> </tr> </table>	294.22																			
294.22																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Matthew Wilson	<b>Transaction ID:</b> D312188 <b>Date of Disbursement</b>																				
Mailing Address 5760 Braveheart Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	0												
City Tallahassee State FL Zip Code 32317-9409	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Auto Travel Candidate Name	<table border="1"> <tr> <td colspan="10">294.22</td> </tr> </table>	294.22																			
294.22																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Matthew Wilson	<b>Transaction ID:</b> D312689 <b>Date of Disbursement</b>																				
Mailing Address 5760 Braveheart Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	8		2	0	1	0												
City Tallahassee State FL Zip Code 32317-9409	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Staff Reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">227.14</td> </tr> </table>	227.14																			
227.14																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

521.36

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Matthew Wilson

Mailing Address 5760 Braveheart Way

City Tallahassee State FL Zip Code 32317-9409

Purpose of Disbursement

Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312690

Date of Disbursement

07 / 28 / 2010

Amount of Each Disbursement this Period

227.14

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Ashley Ball

Mailing Address 822 E 15th Ave

City New Smyrna Beach State FL Zip Code 32169-3404

Purpose of Disbursement

Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312691

Date of Disbursement

07 / 28 / 2010

Amount of Each Disbursement this Period

718.94

C.

Full Name (Last, First, Middle Initial)

Ashley Ball

Mailing Address 822 E 15th Ave

City New Smyrna Beach State FL Zip Code 32169-3404

Purpose of Disbursement

Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312692

Date of Disbursement

07 / 28 / 2010

Amount of Each Disbursement this Period

539.66

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

718.94

TOTAL This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b>	Full Name (Last, First, Middle Initial) T-Mobile			<b>Transaction ID:</b> D312693 <b>Date of Disbursement</b> <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>7</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	8		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y															
	0	7		2	8		2	0	1	0															
	Mailing Address PO Box 742596																								
	City Cincinnati		State OH	Zip Code 45274-2596																					
Purpose of Disbursement Admin Cell Phone				Category/ Type																					
Candidate Name																									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																					
State: District:																									
<b>B.</b>	Full Name (Last, First, Middle Initial) Tarin Nix			<b>Transaction ID:</b> D312835 <b>Date of Disbursement</b> <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	9		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y															
	0	7		2	9		2	0	1	0															
	Mailing Address 2704 French Pl Apt G																								
	City Austin		State TX	Zip Code 78722-2330																					
Purpose of Disbursement Staff Reimbursement				Category/ Type																					
Candidate Name																									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period <table border="1"><tr><td colspan="10">359.48</td></tr></table>	359.48																				
359.48																									
State: District:																									
<b>C.</b>	Full Name (Last, First, Middle Initial) Chevron			<b>Transaction ID:</b> D312836 <b>Date of Disbursement</b> <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	9		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y															
	0	7		2	9		2	0	1	0															
	Mailing Address 501 El Camino Real																								
	City Millbrae		State CA	Zip Code 94030-2030																					
Purpose of Disbursement Auto Travel				Category/ Type																					
Candidate Name																									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period <table border="1"><tr><td colspan="10">301.98</td></tr></table> [MEMO ITEM]	301.98																				
301.98																									
State: District:																									

SUBTOTAL of Disbursements This Page (optional) .....

359.48

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Sunpass	<b>Transaction ID:</b> D312837 <b>Date of Disbursement</b>
Mailing Address 605 Suwannee St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 9 / 2 0 1 0</div> </div>
City Tallahassee State FL Zip Code 32399-3601	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Auto Travel Candidate Name	<div> <div>57.50</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) John Estes	<b>Transaction ID:</b> D312864 <b>Date of Disbursement</b>
Mailing Address 9884 SW 26th Ter	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 9 / 2 0 1 0</div> </div>
City Miami State FL Zip Code 33165-2627	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Staff Reimbursement Candidate Name	<div> <div>20.00</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Chevron	<b>Transaction ID:</b> D312866 <b>Date of Disbursement</b>
Mailing Address 501 El Camino Real	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 9 / 2 0 1 0</div> </div>
City Millbrae State CA Zip Code 94030-2030	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Auto Travel Candidate Name	<div> <div>20.00</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

20.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Maria Quezada

Mailing Address 322 E Mayfield Blvd

City San Antonio State TX Zip Code 78214-2448

Purpose of Disbursement  
Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312869

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

46.24

B.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City Houston State TX Zip Code 77252-2463

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312872

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

46.24

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Sabrina Diz

Mailing Address 142 SE 9th Ct

City Hialeah State FL Zip Code 33010-5531

Purpose of Disbursement  
Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312874

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

102.94

SUBTOTAL of Disbursements This Page (optional) .....

149.18

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City  
Houston

State  
TX

Zip Code  
77252-2463

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D312876

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

102.94

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Justin Shoham

Mailing Address 28 Lark Pl

City  
Old Bridge

State  
NJ

Zip Code  
08857-3062

Purpose of Disbursement  
Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D312879

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

55.20

C.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City  
Houston

State  
TX

Zip Code  
77252-2463

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D312880

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

55.20

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

55.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 69 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Kevin Chambliss

Transaction ID: D312881

Date of Disbursement

07 / 29 / 2010

Mailing Address 746 N Annie Glidden Rd  
Apt 404

City State Zip Code  
Dekalb IL 60115-2130

Amount of Each Disbursement this Period

27.00

Purpose of Disbursement  
Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Transaction ID: D312886

Date of Disbursement

07 / 29 / 2010

Mailing Address PO Box 2463

City State Zip Code  
Houston TX 77252-2463

Amount of Each Disbursement this Period

27.00

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Ricardo Junquera

Transaction ID: D312930

Date of Disbursement

07 / 29 / 2010

Mailing Address 10041 SW 48th St

City State Zip Code  
Miami FL 33165-6379

Amount of Each Disbursement this Period

115.55

Purpose of Disbursement  
Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

142.55

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Citgo - Corporate

Mailing Address 1293 Eldridge Pkwy

City  
Houston

State  
TX

Zip Code  
77077-1670

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D312934

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

115.55

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

William Sanchez

Mailing Address 698 NW 134th PI

City  
Miami

State  
FL

Zip Code  
33182-1668

Purpose of Disbursement  
Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D312936

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

66.82

C.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City  
Houston

State  
TX

Zip Code  
77252-2463

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D312938

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

66.82

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

66.82

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 71 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Denise Rodriguez

Mailing Address 12514 Wandering Brook Dr

City State Zip Code  
Charlotte NC 28273-6974

Purpose of Disbursement

Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312943

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

41.81

B.

Full Name (Last, First, Middle Initial)

BP American Headquarters

Mailing Address 501 Westlake Park Blvd

City State Zip Code  
Houston TX 77079-2604

Purpose of Disbursement

Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312947

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

41.81

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Emily Mcilveene

Mailing Address 148 Meadow Brook Dr

City State Zip Code  
Rock Spring GA 30739-2341

Purpose of Disbursement

Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312957

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

97.30

SUBTOTAL of Disbursements This Page (optional) .....

139.11

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 72 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City  
Houston

State  
TX

Zip Code  
77252-2463

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D312964

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

97.30

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Gaston Araoz

Mailing Address 1505 Crystal Dr  
Apt 504

City  
Arlington

State  
VA

Zip Code  
22202-4117

Purpose of Disbursement  
Staff Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D312966

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

21.02

C.

Full Name (Last, First, Middle Initial)

Florida's Turnpike

Mailing Address Turnpike Mile Post 263  
Bldg. 5315

City  
Ocoee

State  
FL

Zip Code  
34761

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D312970

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

21.02

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

21.02

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Hector Martinez	<b>Transaction ID:</b> D312971 <b>Date of Disbursement</b>																				
Mailing Address 11100 SW 46th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	9		2	0	1	0												
City Miami State FL Zip Code 33165-4735	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Staff Reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">81.58</td> </tr> </table>	81.58																			
81.58																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Chevron One Stop	<b>Transaction ID:</b> D312972 <b>Date of Disbursement</b>																				
Mailing Address 300 N. Washington	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	9		2	0	1	0												
City Sarasota State FL Zip Code 34236	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Auto Travel Candidate Name	<table border="1"> <tr> <td colspan="10">81.58</td> </tr> </table>	81.58																			
81.58																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ashley Ball	<b>Transaction ID:</b> D313287 <b>Date of Disbursement</b>																				
Mailing Address 822 E 15th Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
City New Smyrna Beach State FL Zip Code 32169-3404	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Staff Reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">531.22</td> </tr> </table>	531.22																			
531.22																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**612.80**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 74 / 142

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Ashley Ball Mailing Address 822 E 15th Ave	<b>Transaction ID:</b> D313288 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div>
City State Zip Code New Smyrna Beach FL 32169-3404 Purpose of Disbursement Auto Travel Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>531.22</div> <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Matthew Wilson Mailing Address 5760 Braveheart Way City State Zip Code Tallahassee FL 32317-9409 Purpose of Disbursement Staff Reimbursement Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> D313289 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>182.83</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Matthew Wilson Mailing Address 5760 Braveheart Way City State Zip Code Tallahassee FL 32317-9409 Purpose of Disbursement Auto Travel Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> D313290 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>182.83</div> <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

182.83

**TOTAL** This Period (last page this line number only) .....

67362.83

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 75 / 142

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Florida Democratic Party Non Federal Account	<b>Transaction ID:</b> D436097 <b>Date of Disbursement</b>
Mailing Address 214 S Bronough St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Tallahassee State FL Zip Code 32301-1705	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Transfer	<div>260000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Florida Democratic Party Non Federal Account	<b>Transaction ID:</b> D436101 <b>Date of Disbursement</b>
Mailing Address 214 S Bronough St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div>
City Tallahassee State FL Zip Code 32301-1705	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Transfer	<div>10000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Florida Democratic Party Non Federal Account	<b>Transaction ID:</b> D436102 <b>Date of Disbursement</b>
Mailing Address 214 S Bronough St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 7 / 2 0 1 0</div> </div>
City Tallahassee State FL Zip Code 32301-1705	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Transfer	<div>5000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

275000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 76 / 142

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Florida Democratic Party Non Federal Account

Mailing Address 214 S Bronough St

City Tallahassee State FL Zip Code 32301-1705

Purpose of Disbursement  
Transfer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D436103

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) .....

5000.00

TOTAL This Period (last page this line number only) .....

280000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 142

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Gaston Araoz

Mailing Address 1505 Crystal Dr  
Apt 504

City Arlington State VA Zip Code 22202-4117

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313264

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

913.24

B.

Full Name (Last, First, Middle Initial)

Gabrielle Ann Arcangeli

Mailing Address 155 Whetherbine Way W

City Tallahassee State FL Zip Code 32301-8538

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313051

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

1360.10

C.

Full Name (Last, First, Middle Initial)

Gabrielle Ann Arcangeli

Mailing Address 155 Whetherbine Way W

City Tallahassee State FL Zip Code 32301-8538

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312075

Date of Disbursement

07 / 15 / 2010

Amount of Each Disbursement this Period

1360.10

SUBTOTAL of Disbursements This Page (optional) .....

3633.44

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 / 142

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Ashley Ball	<b>Transaction ID:</b> D312097 <b>Date of Disbursement</b>																				
Mailing Address 822 E 15th Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	1	0												
City New Smyrna Beach State FL Zip Code 32169-3404	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1802.98</td> </tr> </table>	1802.98																			
1802.98																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ashley Ball	<b>Transaction ID:</b> D313258 <b>Date of Disbursement</b>																				
Mailing Address 822 E 15th Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
City New Smyrna Beach State FL Zip Code 32169-3404	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1902.98</td> </tr> </table>	1902.98																			
1902.98																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Lucas P Barks	<b>Transaction ID:</b> D313265 <b>Date of Disbursement</b>																				
Mailing Address 71 Gray Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
City Gorham State ME Zip Code 04038-1110	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">913.24</td> </tr> </table>	913.24																			
913.24																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**4619.20**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 142

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Craig Borkon	<b>Transaction ID:</b> D313278 <b>Date of Disbursement</b>
Mailing Address 8571 Brody Way ---	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div>
City Boca Raton State FL Zip Code 33433-7647	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary	<div>1447.47</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Bradford County Supervisor of Elections	<b>Transaction ID:</b> D312687 <b>Date of Disbursement</b>
Mailing Address PO Box 58	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 1 0</div> </div>
City Starke State FL Zip Code 32091-0058	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Voter File	<div>25.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Chambliss	<b>Transaction ID:</b> D313266 <b>Date of Disbursement</b>
Mailing Address 746 N Annie Glidden Rd Apt 404	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div>
City Dekalb State IL Zip Code 60115-2130	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary	<div>936.41</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

2408.88

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 142

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Ogden Frank Clark

Mailing Address 3100 NE 49th St

City  
Fort Lauderdale

State  
FL

Zip Code  
33308-4902

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D313257

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 30 / 2010

Amount of Each Disbursement this Period

1114.39

B.

Full Name (Last, First, Middle Initial)

Matthew Coppens

Mailing Address 2830 4th St NW

City  
Naples

State  
FL

Zip Code  
34120-1394

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D313267

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 30 / 2010

Amount of Each Disbursement this Period

890.08

C.

Full Name (Last, First, Middle Initial)

Dixie County Supervisor of Elections

Mailing Address PO Box 2057

City  
Cross City

State  
FL

Zip Code  
32628-2057

Purpose of Disbursement  
Voter File

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D310117

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 09 / 2010

Amount of Each Disbursement this Period

10.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2014.47

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Sabrina Diz

Mailing Address 142 SE 9th Ct

City  
Hialeah

State  
FL

Zip Code  
33010-5531

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D313268

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 30 / 2010

Amount of Each Disbursement this Period

890.08

B.

Full Name (Last, First, Middle Initial)

John Estes

Mailing Address 9884 SW 26th Ter

City  
Miami

State  
FL

Zip Code  
33165-2627

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D313269

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 30 / 2010

Amount of Each Disbursement this Period

936.41

C.

Full Name (Last, First, Middle Initial)

Florida Department of State

Mailing Address 500 S Bronough St  
R A GRAY BLDG

City  
Tallahassee

State  
FL

Zip Code  
32399-6504

Purpose of Disbursement  
Voter File

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D310725

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 14 / 2010

Amount of Each Disbursement this Period

10.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1836.49

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 82 / 142

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.** Full Name (Last, First, Middle Initial)  
Gadsden County Supervisor of Elections

Mailing Address PO Box 186

City Quincy State FL Zip Code 32353-0186

Purpose of Disbursement  
Voter File

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D310118

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 09 / 2010

Amount of Each Disbursement this Period

5.00

**B.** Full Name (Last, First, Middle Initial)  
Jason Garrett

Mailing Address PO Box 555

City Osprey State FL Zip Code 34229-0555

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312103

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 15 / 2010

Amount of Each Disbursement this Period

536.76

**C.** Full Name (Last, First, Middle Initial)  
Jason Garrett

Mailing Address PO Box 555

City Osprey State FL Zip Code 34229-0555

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313259

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 30 / 2010

Amount of Each Disbursement this Period

1160.72

**SUBTOTAL** of Disbursements This Page (optional) .....

1702.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 83 / 142

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Michael Gray

Mailing Address 920 E 3rd Ave

City  
New Smyrna Beach

State  
FL

Zip Code  
32169-3147

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D313260

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

1160.72

B.

Full Name (Last, First, Middle Initial)

Michael Gray

Mailing Address 920 E 3rd Ave

City  
New Smyrna Beach

State  
FL

Zip Code  
32169-3147

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D312105

Date of Disbursement

07 / 15 / 2010

Amount of Each Disbursement this Period

1189.64

C.

Full Name (Last, First, Middle Initial)

Hendry County Supervisor of Elections

Mailing Address PO Box 174

City  
Labelle

State  
FL

Zip Code  
33975-0174

Purpose of Disbursement  
Voter File

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D310119

Date of Disbursement

07 / 09 / 2010

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional) .....

2500.36

TOTAL This Period (last page this line number only) .....

	21b		22		23		24		25		26
	27		28a		28b		28c		29	x	30b

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

07 / 30 / 2010

State:  District:

07 / 30 / 2010

State:  District:

State:  District:

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 85 / 142

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.** Full Name (Last, First, Middle Initial)  
Levy County Supervisor of Elections

Mailing Address 421 S Court St

City State Zip Code  
Bronson FL 32621-6520

Purpose of Disbursement  
Voter File

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D310120

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 09 / 2010

Amount of Each Disbursement this Period

10.00

**B.** Full Name (Last, First, Middle Initial)  
Joshua H Loewenstein

Mailing Address 1908 NW 4th Ave  
Apt 108

City State Zip Code  
Boca Raton FL 33432-1501

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D312096

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 15 / 2010

Amount of Each Disbursement this Period

1060.72

**C.** Full Name (Last, First, Middle Initial)  
Joshua H Loewenstein

Mailing Address 1908 NW 4th Ave  
Apt 108

City State Zip Code  
Boca Raton FL 33432-1501

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D313256

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 30 / 2010

Amount of Each Disbursement this Period

1160.73

**SUBTOTAL** of Disbursements This Page (optional) .....

2231.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 86 / 142

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jason Lutin

Mailing Address 2540 NW 24th St

City  
Boca Raton

State  
FL

Zip Code  
33434-4359

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313062

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

1967.92

B.

Full Name (Last, First, Middle Initial)

Jason Lutin

Mailing Address 2540 NW 24th St

City  
Boca Raton

State  
FL

Zip Code  
33434-4359

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312126

Date of Disbursement

07 / 15 / 2010

Amount of Each Disbursement this Period

1967.92

C.

Full Name (Last, First, Middle Initial)

Hector Martinez

Mailing Address 11100 SW 46th St

City  
Miami

State  
FL

Zip Code  
33165-4735

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313273

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

890.08

SUBTOTAL of Disbursements This Page (optional) .....

4825.92

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Emily McIlveene

Mailing Address 148 Meadow Brook Dr

City State Zip Code  
Rock Spring GA 30739-2341

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313272

Date of Disbursement

/   /

Amount of Each Disbursement this Period

913.24

B.

Full Name (Last, First, Middle Initial)

Ms. Anne O Morgan

Mailing Address 741 W Keller St

City State Zip Code  
Hernando FL 34442-8810

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313009

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2907.77

C.

Full Name (Last, First, Middle Initial)

Ms. Anne O Morgan

Mailing Address 741 W Keller St

City State Zip Code  
Hernando FL 34442-8810

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312076

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2907.78

**SUBTOTAL** of Disbursements This Page (optional) .....

6728.79

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 88 / 142

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) George Morse	<b>Transaction ID:</b> D313005 <b>Date of Disbursement</b>
Mailing Address 1908 NW 41st Ave Apt 108	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div>
City Boca Raton State FL Zip Code 33432	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div> <div>1014.39</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Tarin Nix	<b>Transaction ID:</b> D312111 <b>Date of Disbursement</b>
Mailing Address 2704 French Pl Apt G	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Austin State TX Zip Code 78722-2330	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div> <div>2836.81</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Tarin Nix	<b>Transaction ID:</b> D313263 <b>Date of Disbursement</b>
Mailing Address 2704 French Pl Apt G	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div>
City Austin State TX Zip Code 78722-2330	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div> <div>2129.31</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**5980.51**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Okeechobee County Supervisor of Elections

Mailing Address 307 NW 2nd St

City Okeechobee State FL Zip Code 34972-4119

Purpose of Disbursement  
Voter File

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D310127

Date of Disbursement

07 / 09 / 2010

Amount of Each Disbursement this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Osceola County Supervisor Of Elections

Mailing Address 2509 E Irlo Bronson Memorial Hwy

City Kissimmee State FL Zip Code 34744-4909

Purpose of Disbursement  
Voter File

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D313291

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Martin Pallman

Mailing Address 2377 Fernview Dr

City Orange Park State FL Zip Code 32065-7203

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D313262

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

1018.91

SUBTOTAL of Disbursements This Page (optional) .....

1048.91

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.** Full Name (Last, First, Middle Initial)  
Pinellas County Supervisor Of Elections

Mailing Address 3001 Starkey Road

City State Zip Code  
Largo FL 33773

Purpose of Disbursement  
Voter File

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D310121

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 09 2010

Amount of Each Disbursement this Period

8.00

**B.** Full Name (Last, First, Middle Initial)  
Maria Quezada

Mailing Address 322 E Mayfield Blvd

City State Zip Code  
San Antonio TX 78214-2448

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D313274

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 30 2010

Amount of Each Disbursement this Period

890.08

**C.** Full Name (Last, First, Middle Initial)  
Pamela Rivera

Mailing Address 232 Afton Sq  
Unit 212

City State Zip Code  
Altamonte Springs FL 32714-3848

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D313261

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 30 2010

Amount of Each Disbursement this Period

1137.55

**SUBTOTAL** of Disbursements This Page (optional) .....

2035.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Pamela Rivera

Mailing Address 232 Afton Sq  
Unit 212

City Altamonte Springs State FL Zip Code 32714-3848

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312106

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1037.55

B.

Full Name (Last, First, Middle Initial)

Denise Rodriguez

Mailing Address 12514 Wandering Brook Dr

City Charlotte State NC Zip Code 28273-6974

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313275

Date of Disbursement

/   /

Amount of Each Disbursement this Period

890.08

C.

Full Name (Last, First, Middle Initial)

William Sanchez

Mailing Address 698 NW 134th PI

City Miami State FL Zip Code 33182-1668

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313276

Date of Disbursement

/   /

Amount of Each Disbursement this Period

936.41

SUBTOTAL of Disbursements This Page (optional) .....

2864.04

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Justin Shoham Mailing Address 28 Lark Pl	<b>Transaction ID:</b> D313277 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div>
City Old Bridge State NJ Zip Code 08857-3062 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>890.08</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Sumter County Supervisor of Elections Mailing Address 900 N Main St City Bushnell State FL Zip Code 33513-5008 Purpose of Disbursement Voter File Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D312688 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Suwanee County Supervisor of Elections Mailing Address 220 Pine Ave SW City Live Oak State FL Zip Code 32064-2315 Purpose of Disbursement Voter File Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D310136 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>10.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

905.08

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Ms. Karen L. Thurman

Mailing Address 9067 SW 190th Avenue Rd

City  
Dunnellon

State  
FL

Zip Code  
34432-2827

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312074

Date of Disbursement

07 / 15 / 2010

Amount of Each Disbursement this Period

3232.95

B.

Full Name (Last, First, Middle Initial)

Ms. Karen L. Thurman

Mailing Address 9067 SW 190th Avenue Rd

City  
Dunnellon

State  
FL

Zip Code  
34432-2827

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313049

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

3232.95

C.

Full Name (Last, First, Middle Initial)

Union County Supervisor of Elections

Mailing Address 55 W Main St

City  
Lake Butler

State  
FL

Zip Code  
32054-1600

Purpose of Disbursement  
Voter File

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312686

Date of Disbursement

07 / 23 / 2010

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional) .....

6515.90

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 94 / 142

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Matthew Wilson

Mailing Address 5760 Braveheart Way

City Tallahassee State FL Zip Code 32317-9409

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D313255

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

921.02

B.

Full Name (Last, First, Middle Initial)

Matthew Wilson

Mailing Address 5760 Braveheart Way

City Tallahassee State FL Zip Code 32317-9409

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D312095

Date of Disbursement

07 / 15 / 2010

Amount of Each Disbursement this Period

821.02

SUBTOTAL of Disbursements This Page (optional) .....

1742.04

TOTAL This Period (last page this line number only) .....

56581.95

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 95 / 142

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor**  
 Production Resource Group

**Nature of Debt (Purpose):**  
 Audio Visual/Conference

Mailing Address 1902 Cypress Lake Dr

City	State	ZIP Code
Orlando	FL	32837-8458

Outstanding Balance Beginning This Period

18541.50

Transaction ID: D119404

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18541.50

1) **SUBTOTALS** This Period This Page (optional)..... ▶

18541.50

2) **TOTALS** This Period (last page this line number only)..... ▶

18541.50

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

18541.50

**SCHEDULE H2 (FEC Form 3X)****ALLOCATION RATIOS**

PAGE96 / 142

NAME OF COMMITTEE (In Full)

**DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA****RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT  
ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

## ACTIVITY OR EVENT IDENTIFIER

**Jefferson Jackson 2010**

## ACTIVITY IS:

☒ Fundraising ☐ Direct Candidate Support

## CHECK IF THE RATIO IS:

☐ New ☐ Revised ☒ Same as Previously Reported

FEDERAL %

**12.00** %

NONFEDERAL %

**88.00** %Transaction ID:  
R73



**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 97 / 142  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

NAME OF ACCOUNT  
 Non Federal

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 7 / 0 5 / 2 0 1 0

TOTAL AMOUNT TRANSFERRED

151827.43

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

151827.43

Transaction ID: T463

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 98 / 142  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

NAME OF ACCOUNT  
 Non Federal

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 7 / 1 3 / 2 0 1 0

TOTAL AMOUNT TRANSFERRED

-3499.73

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

-3499.73

Transaction ID: T465

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

148327.70

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

148327.70

A. Form/Schedule : **H3**  
Transaction ID : **T465**

Reverse allocation of refund from Payroll Matters on 8/3/2009.

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 100 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
A-1 Florist and Exquisite

Mailing Address

109 NE 3rd St

City

State

Zip Code

Hallandale Beach

FL

33009-4218

Purpose of Disbursement:  
FlowersCategory/  
TypeActivity or Event Identifier:  
Jefferson Jackson 2010

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

193306.14

Date 07 / 15 / 2010

Transaction ID: D312135

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

208.80

1531.20

1740.00

**B. Full Name (Last, First, Middle Initial)**  
Alyssa Miller

Mailing Address

900 Riggins Rd Apt 723

City

State

Zip Code

Tallahassee

FL

32308-2220

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 15 / 2010

Transaction ID: D312122

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

272.03

1023.35

1295.38

**C. Full Name (Last, First, Middle Initial)**  
Alyssa Miller

Mailing Address

900 Riggins Rd Apt 723

City

State

Zip Code

Tallahassee

FL

32308-2220

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 30 / 2010

Transaction ID: D313059

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

272.03

1023.36

1295.39

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

752.86

3577.91

4330.77

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 101 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Alyssa Miller

Mailing Address

900 Riggins Rd Apt 723

 City State Zip Code  
Tallahassee FL 32308-2220

 Purpose of Disbursement:  
Auto Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 1 0

Transaction ID: D311987

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.60		126.40		160.00

**B. Full Name (Last, First, Middle Initial)**  
Anagram Corporation

Mailing Address

310 W Jefferson St

 City State Zip Code  
Tallahassee FL 32301-1419

 Purpose of Disbursement:  
Admin Lease/Rent
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: D308592

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
801.41		3014.84		3816.25

**C. Full Name (Last, First, Middle Initial)**  
Ms. Anne O Morgan

Mailing Address

741 W Keller St

 City State Zip Code  
Hernando FL 34442-8810

 Purpose of Disbursement:  
Auto Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 1 0

Transaction ID: D311983

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
860.21		3236.04		4096.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 102 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Avis Rent A Car - Corporate

Mailing Address

6 Sylvan Way

City	State	Zip Code
Parsippany	NJ	07054-3826

 Purpose of Disbursement:  
Auto Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	9	/	2	0	1	0

Transaction ID: D311839

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.76		232.35		294.11

**B. Full Name (Last, First, Middle Initial)**  
Avis Rent A Car - Corporate

Mailing Address

6 Sylvan Way

City	State	Zip Code
Parsippany	NJ	07054-3826

 Purpose of Disbursement:  
Auto Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	1	0

Transaction ID: D311841

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.57		378.33		478.90

**C. Full Name (Last, First, Middle Initial)**  
Benjamin King

Mailing Address

513 Collins Dr

City	State	Zip Code
Tallahassee	FL	32303-5252

 Purpose of Disbursement:  
Consulting/IT
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	9	/	2	0	1	0

Transaction ID: D309990

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
267.33		1005.68		1273.01

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 103 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Blue Cross and Blue Shield of Florida

 Mailing Address  
PO Box 2210

City	State	Zip Code
Jacksonville	FL	32203-2210

 Purpose of Disbursement:  
Benefits

Category/Type

 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	8	/	2	0	1	0

Transaction ID: D312725

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1285.46		4835.80		6121.26

**B. Full Name (Last, First, Middle Initial)**  
Blue Cross and Blue Shield of Florida

 Mailing Address  
PO Box 2210

City	State	Zip Code
Jacksonville	FL	32203-2210

 Purpose of Disbursement:  
Benefits

Category/Type

 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	1	0

Transaction ID: D308645

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1285.46		4835.80		6121.26

**C. Full Name (Last, First, Middle Initial)**  
Blue State Digital, LLC

 Mailing Address  
734 15th St NW Ste 1200

City	State	Zip Code
Washington	DC	20005-1013

 Purpose of Disbursement:  
Admin Website

Category/Type

 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	1	0

Transaction ID: D308295

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
294.37		1107.38		1401.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2865.29		10778.98		13644.27

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 104 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Broward County Council Of Professional Firefighter

## Mailing Address

813 NE 11th Ave 3800 Inverrary Blvd

City State Zip Code

Pompano Beach FL 33060-5728

Purpose of Disbursement:  
ContributionCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 

M	M
0	7

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D308291

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

63.00

237.00

300.00

**B. Full Name (Last, First, Middle Initial)**

Capital Business Center

## Mailing Address

1851 S Monroe St

City State Zip Code  
Tallahassee FL 32301-5527Purpose of Disbursement:  
Admin Lease/RentCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 

M	M
0	7

 / 

D	D
2	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D312004

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.19

147.41

186.60

**C. Full Name (Last, First, Middle Initial)**

Century Link

## Mailing Address

PO Box 96064

City State Zip Code  
Charlotte NC 28296-0064Purpose of Disbursement:  
Admin TelephoneCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 

M	M
0	7

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D308285

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

126.33

475.25

601.58

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

228.52

859.66

1088.18

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 105 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Ms. Christina Boltin

## Mailing Address

2413 Bayshore Blvd

City	State	Zip Code
Tampa	FL	33629-7333

Purpose of Disbursement:  
Auto TravelCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 14 / 2010

Transaction ID: D311986

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.60		126.40		160.00

**B. Full Name (Last, First, Middle Initial)**

Ms. Christina Boltin

## Mailing Address

2413 Bayshore Blvd

City	State	Zip Code
Tampa	FL	33629-7333

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 15 / 2010

Transaction ID: D312113

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
370.68		1394.44		1765.12

**C. Full Name (Last, First, Middle Initial)**

Ms. Christina Boltin

## Mailing Address

2413 Bayshore Blvd

City	State	Zip Code
Tampa	FL	33629-7333

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 30 / 2010

Transaction ID: D313007

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.81		1553.31		1765.12

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
616.09		3074.15		3690.24

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 106 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Christopher Lazo

Mailing Address

1951 N Meridian Rd Apt 28

City	State	Zip Code
Tallahassee	FL	32303-5249

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 15 / 2010

Transaction ID: D312123

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

**B. Full Name (Last, First, Middle Initial)**  
Christopher Lazo

Mailing Address

1951 N Meridian Rd Apt 28

City	State	Zip Code
Tallahassee	FL	32303-5249

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 30 / 2010

Transaction ID: D313060

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

**C. Full Name (Last, First, Middle Initial)**  
City of Tallahassee Revenue Dept.

Mailing Address

B0x A4 300 South Adams St.

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
City Tax

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 07 / 2010

Transaction ID: D308587

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.47		103.33		130.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
382.03		1437.13		1819.16

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 107 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
City of Tallahassee

Mailing Address

600 N Monroe St

City	State	Zip Code
Tallahassee	FL	32301-1262

 Purpose of Disbursement:  
Admin Utilities
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	8	/	2	0	1	0

Transaction ID: D312676

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
456.16		1716.04		2172.20

**B. Full Name (Last, First, Middle Initial)**  
Comcast

Mailing Address

PO Box 105184

City	State	Zip Code
Atlanta	GA	30348-5184

 Purpose of Disbursement:  
Admin Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	1	0

Transaction ID: D312008

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.71		235.89		298.60

**C. Full Name (Last, First, Middle Initial)**  
DeltaCom1058

Mailing Address

PO Box 740597

City	State	Zip Code
Atlanta	GA	30374-0597

 Purpose of Disbursement:  
Admin Telephone
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	1	0

Transaction ID: D312007

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
164.03		617.05		781.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
682.90		2568.98		3251.88

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 108 / 142  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
 Eric Jotkoff

Mailing Address

3607 Eagle Nest Ct

City

State

Zip Code

Melbourne

FL

32904-9515

Purpose of Disbursement:  
 Auto Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
 07 / 14 / 2010

Transaction ID: D311984

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.20		140.80		160.00

**B. Full Name (Last, First, Middle Initial)**  
 Eric Jotkoff

Mailing Address

3607 Eagle Nest Ct

City

State

Zip Code

Melbourne

FL

32904-9515

Purpose of Disbursement:  
 Salary

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
 07 / 30 / 2010

Transaction ID: D313008

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
189.68		1390.97		1580.65

**C. Full Name (Last, First, Middle Initial)**  
 Eric Jotkoff

Mailing Address

3607 Eagle Nest Ct

City

State

Zip Code

Melbourne

FL

32904-9515

Purpose of Disbursement:  
 Salary

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
 07 / 15 / 2010

Transaction ID: D312114

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.94		1248.72		1580.66

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
540.82		2780.49		3321.31

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 109 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Eric Perrott

## Mailing Address

704 G St NE Apt B

 City State Zip Code  
Washington DC 20002-3681
Purpose of Disbursement:  
Consulting/ITCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 07 / 2010

Transaction ID: D308583

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

**B. Full Name (Last, First, Middle Initial)**

Everest National Insurance Company

## Mailing Address

PO Box 917807

 City State Zip Code  
Orlando FL 32891-7807
Purpose of Disbursement:  
BenefitsCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 07 / 2010

Transaction ID: D308271

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.11		214.83		271.94

**C. Full Name (Last, First, Middle Initial)**

Florida Department of Revenue

## Mailing Address

5050 W Tennessee St

 City State Zip Code  
Tallahassee FL 32399-6586
Purpose of Disbursement:  
Sales TaxCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 12 / 2010

Transaction ID: D310723

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.51		20.74		26.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
272.62		1025.57		1298.19

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 110 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Gabrielle Ann Arcangeli

Mailing Address

155 Whetherbine Way W

City	State	Zip Code
Tallahassee	FL	32301-8538

 Purpose of Disbursement:  
Auto Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	4	/	2	0	1	0

Transaction ID: D311982

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

**B. Full Name (Last, First, Middle Initial)**  
Harry's Bar & Grill

Mailing Address

301 S Bronough St

City	State	Zip Code
Tallahassee	FL	32301-1706

 Purpose of Disbursement:  
Lunch Meeting
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	1	/	2	0	1	0

Transaction ID: D312057

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.93		29.82		37.75

**C. Full Name (Last, First, Middle Initial)**  
Intermedia.Net

Mailing Address

156 W 56th St Ste 1601

City	State	Zip Code
New York	NY	10019-3878

 Purpose of Disbursement:  
Admin Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	8	/	2	0	1	0

Transaction ID: D309066

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.86		7.01		8.87

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.99		131.63		166.62

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 111 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Intermedia.Net

Mailing Address

156 W 56th St Ste 1601

 City State Zip Code  
New York NY 10019-3878

 Purpose of Disbursement:  
Admin Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: D310722

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.78		367.82		465.60

**B. Full Name (Last, First, Middle Initial)**  
Intermedia.Net

Mailing Address

156 W 56th St Ste 1601

 City State Zip Code  
New York NY 10019-3878

 Purpose of Disbursement:  
Admin Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 1 0

Transaction ID: D312236

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.23		4.61		5.84

**C. Full Name (Last, First, Middle Initial)**  
Intermedia.Net

Mailing Address

156 W 56th St Ste 1601

 City State Zip Code  
New York NY 10019-3878

 Purpose of Disbursement:  
Admin Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

 Date M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 1 0

Transaction ID: D312238

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.61		2.31		2.92

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.62		374.74		474.36

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 112 / 142  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

John E Rogers

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

2257 Collins Rd

City

State

Zip Code

Cairo

GA

39828-4917

## Purpose of Disbursement:

Salary

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Activity or Event Identifier:

Administrative

Date 07 / 30 / 2010

Transaction ID: D313061

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

40.34

151.75

192.09

**B. Full Name (Last, First, Middle Initial)**

John E Rogers

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

2257 Collins Rd

City

State

Zip Code

Cairo

GA

39828-4917

## Purpose of Disbursement:

Partial Salary

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Activity or Event Identifier:

Administrative

Date 07 / 30 / 2010

Transaction ID: D312951

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

36.85

138.65

175.50

**C. Full Name (Last, First, Middle Initial)**

John E Rogers

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

2257 Collins Rd

City

State

Zip Code

Cairo

GA

39828-4917

## Purpose of Disbursement:

Salary

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Activity or Event Identifier:

Administrative

Date 07 / 15 / 2010

Transaction ID: D312124

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

40.34

151.74

192.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

117.53

442.14

559.67

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 113 / 142  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Ms. Karen L. Thurman

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

9067 SW 190th Avenue Rd

City

State

Zip Code

Dunnellon

FL

34432-2827

## Purpose of Disbursement:

Auto Travel

Category/  
Type

## Activity or Event Identifier:

Administrative

Date 07 / 09 / 2010

Transaction ID: D311988

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

25.20

94.80

120.00

**B. Full Name (Last, First, Middle Initial)**

Kyle Schulberg

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

9886 N Kendall Dr Apt H113

City

State

Zip Code

Miami

FL

33176-1827

## Purpose of Disbursement:

Auto Travel

Category/  
Type

## Activity or Event Identifier:

Administrative

Date 07 / 09 / 2010

Transaction ID: D311990

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

16.80

63.20

80.00

**C. Full Name (Last, First, Middle Initial)**

Kyle Schulberg

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

9886 N Kendall Dr Apt H113

City

State

Zip Code

Miami

FL

33176-1827

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative

Date 07 / 15 / 2010

Transaction ID: D312117

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

268.22

1009.04

1277.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

310.22

1167.04

1477.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 114 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Kyle Schulberg

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

9886 N Kendall Dr Apt H113

 City State Zip Code  
 Miami FL 33176-1827
Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 07 / 30 / 2010

Transaction ID: D313010

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
268.22		1009.04		1277.26

**B. Full Name (Last, First, Middle Initial)**

LMH Political Compliance

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

29 Briarwood Dr

 City State Zip Code  
 Ringgold GA 30736-4110
Purpose of Disbursement:  
Consulting/ComplianceCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 07 / 06 / 2010

Transaction ID: D308293

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
420.00		1580.00		2000.00

**C. Full Name (Last, First, Middle Initial)**

Mailing Requirement Office-Tampa

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

5433 W Sligh Ave Ste A

 City State Zip Code  
 Tampa FL 33634-9605
Purpose of Disbursement:  
Admin PostageCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 07 / 28 / 2010

Transaction ID: D312677

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.85		146.15		185.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
727.07		2735.19		3462.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 115 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Mildred O. Smith

Mailing Address

3550 Esplanade Way Apt 8107

City State Zip Code  
Tallahassee FL 32311-3755

Purpose of Disbursement:  
Auto Travel

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
0 7 / 1 4 / 2 0 1 0

Transaction ID: D311980

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 33.60		<input type="text"/> 126.40		<input type="text"/> 160.00

**B. Full Name (Last, First, Middle Initial)**  
Mildred O. Smith

Mailing Address

3550 Esplanade Way Apt 8107

City State Zip Code  
Tallahassee FL 32311-3755

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
0 7 / 3 0 / 2 0 1 0

Transaction ID: D313036

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 317.53		<input type="text"/> 1194.52		<input type="text"/> 1512.05

**C. Full Name (Last, First, Middle Initial)**  
Mildred O. Smith

Mailing Address

3550 Esplanade Way Apt 8107

City State Zip Code  
Tallahassee FL 32311-3755

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
0 7 / 1 5 / 2 0 1 0

Transaction ID: D312116

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 317.53		<input type="text"/> 1194.52		<input type="text"/> 1512.05

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 668.66		<input type="text"/> 2515.44		<input type="text"/> 3184.10

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 116 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Moe's Southwest Grill Corporate

Mailing Address

200 Glenridge Point Pkwy N Ste 200

City	State	Zip Code
Atlanta	GA	30342-1450

Purpose of Disbursement:  
Lunch MeetingCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 27 / 2010

Transaction ID: D312674

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.02		165.61		209.63

**B. Full Name (Last, First, Middle Initial)**  
NGP VAN, Inc.

Mailing Address

1101 15th Street, NW Ste 500 225 I St NW

City	State	Zip Code
Washington	DC	20005-5918

Purpose of Disbursement:  
Software/ComplianceCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 09 / 2010

Transaction ID: D309992

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

**C. Full Name (Last, First, Middle Initial)**  
Nicholas Pellito

Mailing Address

445 Appleyard Dr Apt A2-5

City	State	Zip Code
Tallahassee	FL	32304-2868

Purpose of Disbursement:  
Auto TravelCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 14 / 2010

Transaction ID: D311985

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.60		126.40		160.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
392.62		1477.01		1869.63

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
 Nicholas Pellito

Mailing Address

445 Appleyard Dr Apt A2-5

City	State	Zip Code
Tallahassee	FL	32304-2868

Purpose of Disbursement:  
 Salary

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 15 / 2010

Transaction ID: D312120

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

217.89

819.67

1037.56

**B. Full Name (Last, First, Middle Initial)**  
 Nicholas Pellito

Mailing Address

445 Appleyard Dr Apt A2-5

City	State	Zip Code
Tallahassee	FL	32304-2868

Purpose of Disbursement:  
 Salary

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 30 / 2010

Transaction ID: D313041

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

217.89

819.66

1037.55

**C. Full Name (Last, First, Middle Initial)**  
 One Source Supply Center

Mailing Address

5855 Green Valley Cir Ste 206

City	State	Zip Code
Culver City	CA	90230-6968

Purpose of Disbursement:  
 Admin Office Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 20 / 2010

Transaction ID: D312006

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

111.09

417.91

529.00

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

546.87

2057.24

2604.11

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 118 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Osmond Johnson Janitorial Service

Mailing Address

24131 Lake Talquin Rd

City	State	Zip Code
Tallahassee	FL	32310-4603

Purpose of Disbursement:  
Janitorial ServiceCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 07 / 2010

Transaction ID: D308488

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.00		474.00		600.00

**B. Full Name (Last, First, Middle Initial)**  
PAC Strategies, LLC

Mailing Address

PO Box 7084

City	State	Zip Code
Alexandria	VA	22307-0084

Purpose of Disbursement:  
Consulting/ComplianceCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 20 / 2010

Transaction ID: D312009

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

**C. Full Name (Last, First, Middle Initial)**  
PAi

Mailing Address

PO Box 60

City	State	Zip Code
De Pere	WI	54115-0060

Purpose of Disbursement:  
BenefitsCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 07 / 2010

Transaction ID: D312131

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.93		105.07		133.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
468.93		1764.07		2233.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 119 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 N Monroe St

City	State	Zip Code
Tallahassee	FL	32303-4727

Purpose of Disbursement:  
Payroll TaxCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 30 / 2010

Transaction ID: D313333

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1370.35		5155.12		6525.47

**B. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 N Monroe St

City	State	Zip Code
Tallahassee	FL	32303-4727

Purpose of Disbursement:  
Payroll TaxCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 15 / 2010

Transaction ID: D312078

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1370.35		5155.13		6525.48

**C. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 N Monroe St

City	State	Zip Code
Tallahassee	FL	32303-4727

Purpose of Disbursement:  
Payroll FeesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 15 / 2010

Transaction ID: D312072

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.19		38.31		48.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2750.89		10348.56		13099.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 120 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 N Monroe St

City

State

Zip Code

Tallahassee

FL

32303-4727

Purpose of Disbursement:  
Payroll FeeCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 30 / 2010

Transaction ID: D313334

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.19		38.31		48.50

**B. Full Name (Last, First, Middle Initial)**  
Principal Financial Group

Mailing Address

PO Box 14416 Dept. 900

City

State

Zip Code

Des Moines

IA

50306-3416

Purpose of Disbursement:  
BenefitsCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 28 / 2010

Transaction ID: D312735

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.98		394.92		499.90

**C. Full Name (Last, First, Middle Initial)**  
Purchase Power

Mailing Address

PO Box 371874 P.O. Box 856042

City

State

Zip Code

Pittsburgh

PA

15250-7874

Purpose of Disbursement:  
Admin PostageCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 21 / 2010

Transaction ID: D312017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		78.99		99.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
136.17		512.22		648.39

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 121 / 142

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
 Ricoh Americas Corporation

Mailing Address

21146 Network Pl

City

State

Zip Code

Chicago

IL

60673-1211

Purpose of Disbursement:  
 Admin Lease/Rent

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
 0 7 / 2 2 / 2 0 1 0

Transaction ID: D312186

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

226.00

850.20

1076.20

**B. Full Name (Last, First, Middle Initial)**  
 Scott Arceneaux

Mailing Address

1544 Lorimier Rd

City

State

Zip Code

Jacksonville

FL

32207-4240

Purpose of Disbursement:  
 Auto Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
 0 7 / 0 9 / 2 0 1 0

Transaction ID: D311989

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

42.00

158.00

200.00

**C. Full Name (Last, First, Middle Initial)**  
 Scott Arceneaux

Mailing Address

1544 Lorimier Rd

City

State

Zip Code

Jacksonville

FL

32207-4240

Purpose of Disbursement:  
 Salary

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
 0 7 / 1 5 / 2 0 1 0

Transaction ID: D312119

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

888.74

3343.34

4232.08

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1156.74

4351.54

5508.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 122 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Scott Arceneaux

## Mailing Address

1544 Lorimier Rd

City	State	Zip Code
Jacksonville	FL	32207-4240

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

- ☒
- Administrative
- ☐
- Fundraising
- ☐
- Exempt
- 
- ☐
- Voter Drive
- ☐
- Direct Candidate Support
- 
- ☐
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 30 / 2010

Transaction ID: D313039

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
888.74		3343.35		4232.09

**B. Full Name (Last, First, Middle Initial)**

Service Office Supply

## Mailing Address

PO Box 15038

City	State	Zip Code
Tallahassee	FL	32317-5038

Purpose of Disbursement:  
Admin Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

- ☒
- Administrative
- ☐
- Fundraising
- ☐
- Exempt
- 
- ☐
- Voter Drive
- ☐
- Direct Candidate Support
- 
- ☐
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 07 / 2010

Transaction ID: D308584

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.28		264.39		334.67

**C. Full Name (Last, First, Middle Initial)**

Southwest Airlines

## Mailing Address

2425 Wyman St

City	State	Zip Code
Dallas	TX	75235-2501

Purpose of Disbursement:  
Air TravelCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

- ☒
- Administrative
- ☐
- Fundraising
- ☐
- Exempt
- 
- ☐
- Voter Drive
- ☐
- Direct Candidate Support
- 
- ☐
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 12 / 2010

Transaction ID: D312210

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.88		221.52		280.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1017.90		3829.26		4847.16

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**  
**DISBURSEMENT FOR ALLOCATED**  
**FEDERAL/NONFEDERAL ACTIVITY**

PAGE 123 / 142  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
 Sprint

Mailing Address

6450 Sprint Pkwy

City

State

Zip Code

Overland Park

KS

66251-6105

Purpose of Disbursement:  
 Admin Internet

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
 07 / 20 / 2010

Transaction ID: D312005

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

41.14

154.78

195.92

**B. Full Name (Last, First, Middle Initial)**  
 Stephen Carville

Mailing Address

2401 W Morrison Ave 6610 Burden Ln

City

State

Zip Code

Tampa

FL

33629-4756

Purpose of Disbursement:  
 Salary

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
 07 / 15 / 2010

Transaction ID: D312121

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

177.28

666.90

844.18

**C. Full Name (Last, First, Middle Initial)**  
 Stephen Carville

Mailing Address

2401 W Morrison Ave 6610 Burden Ln

City

State

Zip Code

Tampa

FL

33629-4756

Purpose of Disbursement:  
 Salary

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date  M  M /  D  D /  Y  Y  Y  Y  
 07 / 30 / 2010

Transaction ID: D313058

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

177.28

666.90

844.18

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

395.70

1488.58

1884.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 124 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Sunstream Strategies

Mailing Address

1007 N Federal Hwy

City	State	Zip Code
Fort Lauderdale	FL	33304-1422

Purpose of Disbursement:  
Consulting/PoliticalCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 08 / 2010

Transaction ID: D308272

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1575.00		5925.00		7500.00

**B. Full Name (Last, First, Middle Initial)**  
T-Mobile

Mailing Address

PO Box 742596

City	State	Zip Code
Cincinnati	OH	45274-2596

Purpose of Disbursement:  
Admin Cell PhoneCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 07 / 2010

Transaction ID: D308294

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.72		89.23		112.95

**C. Full Name (Last, First, Middle Initial)**  
The Westin Diplomat Resort & Spa

Mailing Address

3555 S Ocean Dr

City	State	Zip Code
Hollywood	FL	33019-2827

Purpose of Disbursement:  
Site RentalCategory/  
TypeActivity or Event Identifier:  
Jefferson Jackson 2010

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

193306.14

Date 07 / 30 / 2010

Transaction ID: D313281

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19927.94		146138.20		166066.14

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21526.66		152152.43		173679.09

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 125 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Tracy N Henderson

Mailing Address

213 Young St

City

State

Zip Code

Tallahassee

FL

32301-5437

Purpose of Disbursement:

Auto Travel

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 14 / 2010

Transaction ID: D311981

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

25.20

94.80

120.00

**B. Full Name (Last, First, Middle Initial)**

Tracy N Henderson

Mailing Address

213 Young St

City

State

Zip Code

Tallahassee

FL

32301-5437

Purpose of Disbursement:

Salary

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 15 / 2010

Transaction ID: D312128

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

214.59

807.27

1021.86

**C. Full Name (Last, First, Middle Initial)**

Tracy N Henderson

Mailing Address

213 Young St

City

State

Zip Code

Tallahassee

FL

32301-5437

Purpose of Disbursement:

Salary

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 30 / 2010

Transaction ID: D313057

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

214.59

807.27

1021.86

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

454.38

1709.34

2163.72

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 126 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Tracy N Henderson

Mailing Address

213 Young St

City

State

Zip Code

Tallahassee

FL

32301-5437

Purpose of Disbursement:

Salary

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date

M M

/

D D

/

Y Y

Y Y

0 7

0 1

2 0

1 0

Transaction ID: D308292

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

168.00

632.00

800.00

**B. Full Name (Last, First, Middle Initial)**

WalMart Stores, Inc.

Mailing Address

702 SW 8th St

City

State

Zip Code

Bentonville

AR

72716-6209

Purpose of Disbursement:

Admin Office Supplies

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date

M M

/

D D

/

Y Y

Y Y

0 7

1 4

2 0

1 0

Transaction ID: D310724

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

16.41

61.71

78.12

**C. Full Name (Last, First, Middle Initial)**

WalMart Stores, Inc.

Mailing Address

702 SW 8th St

City

State

Zip Code

Bentonville

AR

72716-6209

Purpose of Disbursement:

Admin Office Supplies

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date

M M

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D D

/

Y Y

Y Y

0 7

2 3

2 0

1 0

Transaction ID: D312136

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6.95

26.13

33.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

191.36

719.84

911.20

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 127 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Scott Arceneaux

Mailing Address

1544 Lorimier Rd

City	State	Zip Code
Jacksonville	FL	32207-4240

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 01 / 2010

Transaction ID: D305806

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.40		584.60		740.00

**B. Full Name (Last, First, Middle Initial)**  
Polos on Park

Mailing Address

2626 E Park Ave

City	State	Zip Code
Tallahassee	FL	32301-0802

Purpose of Disbursement:  
LodgingCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 01 / 2010

Transaction ID: D305807

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.40		584.60		740.00

**C. Full Name (Last, First, Middle Initial)**  
Alyssa Miller

Mailing Address

900 Riggins Rd Apt 723

City	State	Zip Code
Tallahassee	FL	32308-2220

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 01 / 2010

Transaction ID: D305809

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.17		252.71		319.88

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
222.57		837.31		1059.88

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 128 / 142  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
 Alyssa Miller

Mailing Address

900 Riggins Rd Apt 723

City State Zip Code  
 Tallahassee FL 32308-2220

Purpose of Disbursement:  
 Auto Travel

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 01 / 2010

Transaction ID: D305810

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

54.48

204.93

259.41

**B. Full Name (Last, First, Middle Initial)**  
 Contemporary Hotel

Mailing Address

4600 N World Dr

City State Zip Code  
 Orlando FL 32830-8413

Purpose of Disbursement:  
 Lunch Meeting

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 01 / 2010

Transaction ID: D305811

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

12.70

47.77

60.47

**C. Full Name (Last, First, Middle Initial)**  
 Ms. Karen L. Thurman

Mailing Address

9067 SW 190th Avenue Rd

City State Zip Code  
 Dunnellon FL 34432-2827

Purpose of Disbursement:  
 Staff Reimbursement

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 09 / 2010

Transaction ID: D310198

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

252.00

948.00

1200.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

252.00

948.00

1200.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 129 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Doverree Properties, LLC

Mailing Address

310 W Jefferson St Attn: Mr. Leonard Pepper

City	State	Zip Code
Tallahassee	FL	32301-1419

Purpose of Disbursement:  
Lodging

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 09 / 2010

Transaction ID: D310199

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

252.00

948.00

1200.00

**B. Full Name (Last, First, Middle Initial)**  
Ms. Anne O Morgan

Mailing Address

741 W Keller St

City	State	Zip Code
Hernando	FL	34442-8810

Purpose of Disbursement:  
Staff Reimbursement

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 09 / 2010

Transaction ID: D310204

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

105.00

395.00

500.00

**C. Full Name (Last, First, Middle Initial)**  
Blue Cross and Blue Shield of Florida

Mailing Address

PO Box 2210

City	State	Zip Code
Jacksonville	FL	32203-2210

Purpose of Disbursement:  
Benefits

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 09 / 2010

Transaction ID: D310205

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

105.00

395.00

500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

105.00

395.00

500.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 130 / 142  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Christopher Lazo

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

1951 N Meridian Rd Apt 28

City State Zip Code  
 Tallahassee FL 32303-5249

Purpose of Disbursement:  
Staff ReimbursementCategory/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Activity or Event Identifier:  
Administrative

Date 07 / 12 / 2010

Transaction ID: D310698

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.41		159.52		201.93

**B. Full Name (Last, First, Middle Initial)**

Applebees

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

3255 University Pkwy

City State Zip Code  
 Sarasota FL 34243-4205

Purpose of Disbursement:  
Lunch MeetingCategory/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Activity or Event Identifier:  
Administrative

Date 07 / 12 / 2010

Transaction ID: D310700

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.47		9.28		11.75

**C. Full Name (Last, First, Middle Initial)**

Christopher Lazo

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

1951 N Meridian Rd Apt 28

City State Zip Code  
 Tallahassee FL 32303-5249

Purpose of Disbursement:  
Auto TravelCategory/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Activity or Event Identifier:  
Administrative

Date 07 / 12 / 2010

Transaction ID: D310699

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.94		150.24		190.18

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.41		159.52		201.93

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 131 / 142

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Stephen Carville

Mailing Address

2401 W Morrison Ave 6610 Burden Ln

City	State	Zip Code
Tampa	FL	33629-4756

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 

M	M
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D	D
1	2

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D310701

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

12.03

45.26

57.29

**B. Full Name (Last, First, Middle Initial)**  
Popeyes

Mailing Address

491 Tennessee St.

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
Lunch MeetingCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 

M	M
0	7

 / 

D	D
1	2

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D310706

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.53

5.74

7.27

**C. Full Name (Last, First, Middle Initial)**  
Stephen Carville

Mailing Address

2401 W Morrison Ave 6610 Burden Ln

City	State	Zip Code
Tampa	FL	33629-4756

Purpose of Disbursement:  
Auto TravelCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 

M	M
0	7

 / 

D	D
1	2

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D310702

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.50

39.52

50.02

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

12.03

45.26

57.29

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 132 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Scott Arceneaux

## Mailing Address

1544 Lorimier Rd

City

State

Zip Code

Jacksonville

FL

32207-4240

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 19 / 2010

Transaction ID: D311828

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.41		24.10		30.51

**B. Full Name (Last, First, Middle Initial)**

USAPARK.net

## Mailing Address

1735 Airport Rd

City

State

Zip Code

Jacksonville

FL

32218-2411

Purpose of Disbursement:  
Auto TravelCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 19 / 2010

Transaction ID: D311829

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.41		24.10		30.51

**C. Full Name (Last, First, Middle Initial)**

Tracy N Henderson

## Mailing Address

213 Young St

City

State

Zip Code

Tallahassee

FL

32301-5437

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 19 / 2010

Transaction ID: D311830

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.43		106.97		135.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.84		131.07		165.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 133 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
7-Eleven Corporate

Mailing Address

2711 N Haskell Ave

City	State	Zip Code
Dallas	TX	75204-2911

 Purpose of Disbursement:  
Auto Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative
**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 19 / 2010

Transaction ID: D311832

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.30

23.70

30.00

**B. Full Name (Last, First, Middle Initial)**  
Florida's Turnpike

Mailing Address

Turnpike Mile Post 263 Bldg. 5315

City	State	Zip Code
Ocoee	FL	34761

 Purpose of Disbursement:  
Auto Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative
**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 19 / 2010

Transaction ID: D311831

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.38

24.02

30.40

**C. Full Name (Last, First, Middle Initial)**  
King Orange Gas Station

Mailing Address

1232 S Main St

City	State	Zip Code
Wildwood	FL	34785-9404

 Purpose of Disbursement:  
Auto Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative
**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 19 / 2010

Transaction ID: D311834

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.35

27.65

35.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 134 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Travel Center of America

## Mailing Address

556 E State Road 44

City

State

Zip Code

Wildwood

FL

34785-9474

## Purpose of Disbursement:

Auto Travel

Category/  
Type

## Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date

M M

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D D

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Y Y

Y Y

0 7

1 9

2 0

1 0

Transaction ID: D311833

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

8.40

31.60

40.00

**B. Full Name (Last, First, Middle Initial)**

Ms. Christina Boltin

## Mailing Address

2413 Bayshore Blvd

City

State

Zip Code

Tampa

FL

33629-7333

## Purpose of Disbursement:

Staff Reimbursement

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date

M M

/

D D

/

Y Y

Y Y

0 7

1 5

2 0

1 0

Transaction ID: D311845

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

25.20

94.80

120.00

**C. Full Name (Last, First, Middle Initial)**

Verizon Wireless

## Mailing Address

PO Box 660108

City

State

Zip Code

Dallas

TX

75266-0108

## Purpose of Disbursement:

Admin Cell Phone

Category/  
Type

## Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date

M M

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D D

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Y Y

Y Y

0 7

1 5

2 0

1 0

Transaction ID: D311851

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

25.20

94.80

120.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

25.20

94.80

120.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 135 / 142  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Kyle Schulberg

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

9886 N Kendall Dr Apt H113

City State Zip Code  
 Miami FL 33176-1827

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 07 / 14 / 2010

Transaction ID: D311859

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.31		61.35		77.66

**B. Full Name (Last, First, Middle Initial)**

Kyle Schulberg

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

9886 N Kendall Dr Apt H113

City State Zip Code  
 Miami FL 33176-1827

Purpose of Disbursement:  
Auto TravelCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 07 / 14 / 2010

Transaction ID: D311860

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.31		61.35		77.66

**C. Full Name (Last, First, Middle Initial)**

Mildred O. Smith

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

3550 Esplanade Way Apt 8107

City State Zip Code  
 Tallahassee FL 32311-3755

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 07 / 20 / 2010

Transaction ID: D312058

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.71		160.69		203.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.02		222.04		281.06

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 136 / 142  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Chevron

## Mailing Address

501 El Camino Real

City

State

Zip Code

Millbrae

CA

94030-2030

## Purpose of Disbursement:

Auto Travel

Category/  
Type

## Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 20 / 2010

Transaction ID: D312100

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.30

23.70

30.00

**B. Full Name (Last, First, Middle Initial)**

Fast Track

## Mailing Address

114 Millinor St

City

State

Zip Code

Madison

FL

32340-2239

## Purpose of Disbursement:

Auto Travel

Category/  
Type

## Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 20 / 2010

Transaction ID: D312062

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.30

23.70

30.00

**C. Full Name (Last, First, Middle Initial)**

First Coast Energy

## Mailing Address

2090 W Oakland Blvd.

City

State

Zip Code

Lake Worth

FL

33467

## Purpose of Disbursement:

Auto Travel

Category/  
Type

## Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 20 / 2010

Transaction ID: D312099

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.40

31.60

40.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 137 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Florida's Turnpike

Mailing Address

Turnpike Mile Post 263 Bldg. 5315

City State Zip Code

Ocoee FL 34761

Purpose of Disbursement:  
Auto Travel

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 20 / 2010

Transaction ID: D312060

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.96

22.44

28.40

**B. Full Name (Last, First, Middle Initial)**  
Island Way Shell

Mailing Address

6812 W Indiantown Rd

City State Zip Code

Jupiter FL 33458-3978

Purpose of Disbursement:  
Auto Travel

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 20 / 2010

Transaction ID: D312098

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.25

19.75

25.00

**C. Full Name (Last, First, Middle Initial)**  
Kangaroo Gas Station

Mailing Address

4301 SW 43rd Street

City State Zip Code

Gainesville FL 32608

Purpose of Disbursement:  
Auto Travel

Category/  
Type

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 20 / 2010

Transaction ID: D312101

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.30

23.70

30.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 138 / 142

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Murphy USA

## Mailing Address

4712 Colonial Blvd

City

State

Zip Code

Fort Myers

FL

33966-1034

Purpose of Disbursement:

Auto Travel

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 

M	M
0	7

 / 

D	D
2	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D312061

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

4.20

15.80

20.00

**B. Full Name (Last, First, Middle Initial)**

Ms. Christina Boltin

## Mailing Address

2413 Bayshore Blvd

City

State

Zip Code

Tampa

FL

33629-7333

Purpose of Disbursement:

Staff Reimbursement

Category/  
Type

Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 

M	M
0	7

 / 

D	D
2	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D312141

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

13.87

52.19

66.06

**C. Full Name (Last, First, Middle Initial)**

Circle K

## Mailing Address

205 N Magnolia Dr

City

State

Zip Code

Tallahassee

FL

32301-2637

Purpose of Disbursement:

Auto Travel

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 

M	M
0	7

 / 

D	D
2	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D312142

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

8.33

31.33

39.66

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

13.87

52.19

66.06

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 139 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Florida's Turnpike

## Mailing Address

Turnpike Mile Post 263 Bldg. 5315

City State Zip Code

Ocoee FL 34761

Purpose of Disbursement:  
Auto TravelCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 21 / 2010

Transaction ID: D312143

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.54

20.86

26.40

**B. Full Name (Last, First, Middle Initial)**

Kyle Schulberg

## Mailing Address

9886 N Kendall Dr Apt H113

City State Zip Code

Miami FL 33176-1827

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 21 / 2010

Transaction ID: D312146

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

41.55

156.31

197.86

**C. Full Name (Last, First, Middle Initial)**

AT&amp;T Mobility

## Mailing Address

PO Box 538695

City State Zip Code

Atlanta GA 30353-8695

Purpose of Disbursement:  
Admin Cell PhoneCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 21 / 2010

Transaction ID: D312148

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

25.20

94.80

120.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

41.55

156.31

197.86

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 140 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Kyle Schulberg

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

9886 N Kendall Dr Apt H113

City State Zip Code  
Miami FL 33176-1827

Purpose of Disbursement:  
Auto TravelCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Date 07 / 21 / 2010

Transaction ID: D312147

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

16.35

61.51

77.86

**B. Full Name (Last, First, Middle Initial)**

Scott Arceneaux

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

1544 Lorimer Rd

City State Zip Code  
Jacksonville FL 32207-4240

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 07 / 28 / 2010

Transaction ID: D312680

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

26.91

101.25

128.16

**C. Full Name (Last, First, Middle Initial)**

AT&amp;T Mobility

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

## Mailing Address

PO Box 538695

City State Zip Code  
Atlanta GA 30353-8695

Purpose of Disbursement:  
Admin Cell PhoneCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Date 07 / 28 / 2010

Transaction ID: D312681

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

26.91

101.25

128.16

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

26.91

101.25

128.16

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 141 / 142  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
 Nicholas Pellito

Mailing Address

445 Appleyard Dr Apt A2-5

City State Zip Code  
 Tallahassee FL 32304-2868

Purpose of Disbursement:  
 Staff Reimbursement

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date M M / D D / Y Y Y Y  
 0 7 / 2 8 / 2 0 1 0

Transaction ID: D312682

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.29		38.70		48.99

**B. Full Name (Last, First, Middle Initial)**  
 Nicholas Pellito

Mailing Address

445 Appleyard Dr Apt A2-5

City State Zip Code  
 Tallahassee FL 32304-2868

Purpose of Disbursement:  
 Auto Travel

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date M M / D D / Y Y Y Y  
 0 7 / 2 8 / 2 0 1 0

Transaction ID: D312683

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.29		38.70		48.99

**C. Full Name (Last, First, Middle Initial)**  
 Ms. Anne O Morgan

Mailing Address

741 W Keller St

City State Zip Code  
 Hernando FL 34442-8810

Purpose of Disbursement:  
 Staff Reimbursement

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date M M / D D / Y Y Y Y  
 0 7 / 2 8 / 2 0 1 0

Transaction ID: D312684

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.15		546.05		691.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.44		584.75		740.19

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 142 / 142  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Ms. Anne O Morgan

## Mailing Address

741 W Keller St

City

State

Zip Code

Hernando

FL

34442-8810

## Purpose of Disbursement:

Auto Travel

Category/  
Type

## Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 28 / 2010

Transaction ID: D312685

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

145.15

546.05

691.20

**B. Full Name (Last, First, Middle Initial)**

Scott Arceneaux

## Mailing Address

1544 Lorimier Rd

City

State

Zip Code

Jacksonville

FL

32207-4240

## Purpose of Disbursement:

Staff Reimbursement

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 30 / 2010

Transaction ID: D313284

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

152.27

572.81

725.08

**C. Full Name (Last, First, Middle Initial)**

Polos on Park

## Mailing Address

2626 E Park Ave

City

State

Zip Code

Tallahassee

FL

32301-0802

## Purpose of Disbursement:

Lodging

Category/  
Type

## Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

740592.00

Date 07 / 30 / 2010

Transaction ID: D313285

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

152.27

572.81

725.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

152.27

572.81

725.08

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

39608.09

222421.17

262029.26